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BY- LEWIS, MARY S.
SAN FRANCISCO STATE COLL., CALIF.

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IN JUNE, 1966, SAN FRANCISCO STATE COLLEGE CONDUCTED AN ORIENTATION SESSION FOR THE PERSONNEL OF CHILD CARE CENTERS IN HEAD START PROGRAMS. FOLLOWING THE WASHINGTON, D. C., HEAD START STAFF GUIDELINES, THE 15 SPEAKERS PRESENTED SUCH TOPICS AS THE IMPACT OF POVERTY, HEALTH AND NUTRITION NEEDS FOR DISADVANTAGED CHILDREN, LANGUAGE DEVELOPMENT, BEHAVIOR PROBLEMS, INDIVIDUAL DIFFERENCES, SELF CONCEPT DEVELOPMENT, AND CHARACTERISTICS OF A GOOD NURSERY SCHOOL. THIS DOCUMENT PRESENTS THE TEXT OF EACH SPEECH. (SF)

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SAN FRANCISCO STATE COLLEGE

HEAD START ORIENTATION

SUMMER
1966

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
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SAN FRANCISCO STATE COLLEGE

PROJECT HEAD START

SUMMER 1966

LECTURES PRESENTED IN THE ORIENTATION SESSION FOR PERSONNEL IN THE CHILD DEVELOPMENT CENTERS

JUNE 19 - 24, 1966

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FOREWARD

San Francisco State College was one of the settings for orientation of HEAD START personnel for the summer '66 eight-week programs. The session was arranged for 150 orientees most of whom planned to be working in Child Development Centers in San Francisco.

The HEAD START staff in Washington, D.C., set the general guidelines for material to be covered in the local orientation settings. This core curriculum was followed in the planning and execution of the session at San Francisco State College. The curriculum covered the main areas of concern for personnel in the individual centers: Health-understanding of the goals of the comprehensive medical examination, immunization program, responsibility for follow-up care and communication with parents on health problems. Education-Discussion of the kinds of programs best able to help deprived children widen their horizons, enhance their self-concepts and subsequently self-confidence so that they are free to learn, and to provide opportunities for success. Social Service-Understanding of the available social services which can help the deprived child and his family. Community Action-Community support by volunteers and local agencies is a necessity for a good program. Therefore, the orientees have to know how to incorporate this help into the daily or weekly schedule of each center. Parent Education-Center staff have the responsibility of helping parents understand and cope more efficiently with their child rearing tasks as well as helping parents become more competent members of society. Skills practiced in the Child Development Centers may lead to enough competency for employment.

In order to accomplish the goals of the core curriculum guest speakers were invited to discuss their areas of competency and eight seminar leaders each conducted small group discussions of this lecture material. In addition, skill sessions and special activity groups were held to enhance the basic material.

It was my intention to tape all the major addresses, have the tapescripts edited and then present the material in booklet form. Unfortunately, technical difficulties caused loss of some material and for this I am very sorry. The speakers were most generous in spending the time necessary to edit their tapescripts and the Booklet Staff was extremely cooperative on a job which lasted most of the summer. At this point I am happy to be able to present each participant with the resulting book of talks.

Mary S. Lewis
Director, Project Head Start
Orientation Session
San Francisco State College

WELCOMING REMARKS

Joseph Bailey, Program Coordinator
The Economic Opportunity Commission of San Francisco

Good evening everyone, and welcome. I sincerely doubt that any of you realize how happy we are to have you here, particularly those of us in San Francisco. I think in all fairness to us you should know some of the difficulties, some of the hassles that we've gone through in the process of getting HEAD START going here in San Francisco for this summer. Around mid-February we received at our office a telegram from Washington, D.C. indicating that the sum of approximately $449,000.00 was available to operate a HEAD START program in San Francisco this summer. We had to have the program in Washington by March 31st, which gave us exactly six weeks to get it together (for approximately 1,500 kids). We weren't quite satisfied with the way HEAD START had operated last year, nor were we satisfied with the number of children that had been involved in the program. And so we took it upon ourselves to cull together a large group of organizations and agencies to see if we couldn't come up with something better for this year. For those of you in San Francisco who aren't aware of it, HEAD START will use six separate organizations and agencies this coming summer to staff and service the 1,500 kids. They are: the Archdiocese of San Francisco, the 1830 Sutter Street Y.W.C.A. (I almost said "M" and I would have been shot by Mrs. Lee), the Spanish Speaking Citizen's Foundation, the San Francisco Unified School District, the Gateway Montessori School, and the Mission Neighborhood Center.

Well--I think all of you can very easily understand that pulling together six separate organizations and agencies that have such divergent foci wasn't the easiest thing in the world to do. In between a whole series of meetings there was a fast trip to St. Louis, which was required for a certain percentage of the staff of any agency that was going to be operating in the HEAD START program. They were picking up the tab, but we had to go. At the office we found out on a Thursday that three of us from our agency had to be in St. Louis by Sunday morning. The process has been hassled by getting everything together for the Help, the Social Work Program, the Nutritional Program, and so when I say that I am so very glad to see you here, you can really understand what I mean.

I am tremendously interested in the programs that you will be working in the coming summer because I think they comprise one of the most important efforts in the entire Poverty Program. I have a sneaking suspicion that most of you here have the sort of dedication--and I don't use the word in the general "Social Work" sense--the sort of dedication to children that will guarantee that the operation in which you are involved can't help but prove successful. But there is one thing that I found about dedicated people, and it is that they're inclined to be so very optimistic, and in the process of doing so very much they sometimes lay themselves open for a lot of unnecessary hurts. All of us, being quite human, have a tendency to set certain expectation levels for the behavior of other people, and it happens as well to the layman. I can remember shortly after I picked up a graduate degree that I thought I was about the most intelligent thing that God had ever let live. We were living in a particular community that had a little seven-year-old with a brain that would make Machiavelli turn green with envy. To show you how Ricky's brain worked--apparently he had decided that the take he had been getting on Halloween Trick or Treat was not quite large enough, so he devised a system which was practically infallible. All the kids would go around trick-or-treating in a large group, and somehow or another Rick decided that since he was a very cute, appealing youngster, who knew everybody in the community by his first name, if he came along just about two hours after everybody else had left, people would make a special effort to give him something. Despite the fact that I considered myself to be only one cut behind Einstein, when Rick rang our doorbell, I fell smack into the middle of his trap because there wasn't a thing left on the table for him. And I said, "Now Rick, you just wait a minute and I'll get something for you." Very quickly I tore into the refrigerator and grabbed the biggest apple I could possibly find, gave it a real fast polish job and help it up, "I got this especially for you, Rick", and I dropped it into his bag. And remember, despite the fact that I was doing something for someone else, I'm still a member of the human race. And there were certain reactions that I was anticipating on the part of a seven-year-old, and all Rick did was to stand there looking down into his bag. Well, I'm not getting technical about it, but my ego needs weren't being met and I wasn't going to let this kid get away with it. So, gently, and rather professionally, I thought, I said, "Rick, aren't you going to say anything?" He did: "You broke all my damn cookies."

I relate the story because it very graphically indicates the fallacy that all of us have a tendency to fall into. When we do something for someone, in our minds they have incurred a debt, and we automatically expect payment. I'm pleading with you--demand no payment from the kids you'll be working with this summer. What you have got to give, they need. But what you have got to give is owed to them. The society of which they have been a part for their very short lives hasn't given it to them. I sincerely hope that this summer will prove one of the most challenging, enjoyable and rewarding that any of you have ever had.

Good luck to all of you. Thank you.

IMPACT OF POVERTY

Dr. Staten Webster, Supervisor, Teacher Education in Social Studies
University of California, Berkeley

The subject about which I have been asked to speak this evening is the "Impact of Poverty." I have been asked to expand upon it and to show the relevance of certain factors to the kinds of problems you will be working with this summer. In trying to do this I would like to divide my comments into three questions:

First of all, "Just who are the poor?" Who are they, and how many can be classified as such? Where are they? The second question to which I would like to speak is: How does poverty affect people, especially children; what are the effects of poverty upon individuals? And finally, I would like to talk about some of the educational problems which we believe are directly related to the effects of poverty.

Currently in this country there is a phenomenon which has come to be known as the Urban Revolution. This is in a sense a movement which sees large numbers of our people moving into big cities. Large numbers of these individuals are people who perhaps are least well equipped to deal with big city life. Large numbers of them are Negroes who are leaving the oppressive conditions of the South to seek "a better life" in the North. There are also Puerto Ricans who are coming from the island to the United States. As the agricultural revolution continues we find larger numbers of Phillipinos, Spanish-surnamed individuals, Indians, and others coming into the city to live. And in many cases, these are people who, as I said earlier, have little of the background and the knowledge necessary to take care of themselves in a city environment. For example, I once had a housekeeper who was desirous of improving her situation. She heard of a job that was to open in a plant in the city. She mentioned this to me, and I said, "Well, why don't you apply for this?" This woman had just come from Arkansas about a month or two before this time, and she said, "I would, but I don't know what to do." And so with this knowledge in mind, I had to sit down and discuss with her the process of calling and asking for appointments, and the kinds of things she would encounter when she went to the Employment Office, for example. There are individuals who not only don't know, in many cases, how to seek employment, but also, don't know how to take advantage of public services which may be available to needy individuals. Nevertheless, this phenomenon is becoming an increasingly serious one, because as such individuals move into cities, we find larger numbers of the better educated, the more sophisticated city dwellers, fleeing to what we call the suburbs. Now let me give you some very quick examples of how this happens.

San Francisco is one of those cities which has experienced a drop in population between 1950 and 1960. This was due to the fact, I'm sure, that while there was a lot of redevelopment going on, other individuals who normally would have stayed moved into Daly City, Pacifica, and places like this which have experienced growth rates of 200% or 300% over a ten year period. Oakland was another city which experienced this phenomenon of a population loss. These are largely White families who are leaving--Orientals in some cases--and as they leave the hearts of big cities, the groups about which I spoke earlier tend to move into these areas. You find an increasingly large proportion of the population of the fourteen major cities of this country being made up of minority group persons. For example, Oakland has about 345,000 people in its population. Of that 345,000 people only approximately 100,000 could be Negroes, and yet, Negro children dominate the public school of Oakland. There are more Negro children in the elementary schools, there are more Negro youngsters in the junior high schools, less Negro youngsters in the high schools. There are more Negroes in the high schools than Whites if you count the Orientals in with the Whites and the Spanish-surnames. There are reasons for this. First of all, those Whites who tend to leave the big cities and go to the suburbs tend to be the younger families, and they tend to be those who have a number of child-bearing years ahead of them. They leave behind them the Whites who are not willing to move or cannot afford to move into the $25,000, $30,000, $40,000 homes. Consequently what you have is an older White population, and a younger, non-White minority population. For example, in Oakland the average White person (in 1960) was 34.6 years of age. The average non-White person, of whom you can assume 95% are Negroes, was 24.6 years of age. If you look at the statistics on any major city, excluding a place like San Diego where you have a military population, you will find that the non-White population is 8 to 15 years younger than the White population. This means that they will have far more children, (they have larger families anyway) and have far more child-bearing years. This is becoming a major urban problem.

Frank Riesman has pointed out that one out of every three children in 1960 in all the major cities of this country can be classified as "Socially Disadvantaged," which is the term I happen to prefer. I think they are socially disadvantaged because there are certain factors operating in this society which limit their chances for full self-realization. These factors may be prejudice; discriminatory practices; and in some places, laws which exclude and segregate certain individuals. They are disadvantaged to the extent that they are unable to fully realize their potential because of class factors, race factors, ethnic group factors. In 1960, one out of every three in the major cities could be classified as being a member of this particular group. It is estimated that in 1970, two out of every three school children will fall into this category. As I work with my candidates in teacher education I try to caution them against the idea of assuming that the schools in which they are going to be stationed will always remain that way. Those of you who are knowledgeable about teaching and have been in it may be aware of the fact that a school can change its complexion and ethnic composition overnight. You let block-busting start, you let people begin to flee an area, and you find that the racial color of it can change overnight.

With that brief discussion of Urban Revolution, which is bringing those large numbers of individuals into cities who are least prepared to cope with city life, let us turn to the first question: Who are the poor in America?

Sometime in the 1930's, Franklin Delano Roosevelt made a very important speech during which he said one-third of the Nation is ill-housed, ill-clothed, and ill-fed. In 1962 Michael Harrington wrote a book entitled The Other America which shocked many people. Of course they wouldn't believe it. Many people disagreed with it completely. And many of them set about to disprove what Mr. Harrington had to say. It was this particular book (it is now available in paper-back and, I suggest, it should be read by everyone for not only is it good writing but he presents a very sound case) which started President Kennedy thinking about trying to do something about poverty in the country. Harrington claimed that some twenty years later, one-fourth of the country's population could still be considered ill-clothed, ill-housed, ill-fed, and ill-nourished. In other words, what Michael Harrington was saying was that forty to fifty million Americans can be classified as being poor. The index which is used to describe poverty in this country is: a family unit has a total annual income of less than $3,000 per year. Now this figure is not constant because certain agencies could use $4,000, some $3,000, $6,000 and so forth, but the initial index of poverty was a total family income of $3,000 a year or less.

The House Committee on Education and Labor, headed by Adam Clayton Powell, did a very intensive study about this when it was trying to suggest poverty legislation. In this country as of 1962 there were approximately forty-seven million family units. Of those family units they estimated that 9.3 million American families had a total income of less than $3,000 a year. Now according to these data these families had about thirty-million members. However, if you stick to family data alone I think you will miss some of the poor, as Mr. Harrington contends. He would say that there are people who insist that there are only twenty-five to thirty million people who are poor in the country, but he says the number is forty to fifty million and he goes on to show this by citing other groups in the society who sometimes escape our definition of poverty. If you look at the per-capita income of the average income of every member of these particular families, you will find that of those 9.3 million poor families, the average income per person in the family amounts to about $590 per year, whereas for the national level the average family income is something like $1,900 per person. You can see that there is a tremendous difference between the amounts of money available to those who happen to be poor as contrasted to those who fortunately happen not to fall into this category. Of the Nation's poor, of the thirty, forty, or fifty-million poor, 22% are non-Whites, and if you consider the fact that there are approximately some nineteen and one-half, almost twenty-million Negroes in the country and the remainder of the non-White population brings the total to something like twenty-two million, you can see that most of the poor families in this country are Negro families. The other non-Whites would be Orientals, Polynesians, and others who fall into these classifications.

Fifty-four percent of the poor people in this country live in big cities. This is an urban phenomena. Forty percent of all farm families also happen to be poor. Now you will be working with urban children and this may not be a significant statistic. You will be working with some families who will reflect this migration from farm to big city areas. In California alone, twenty-four percent of the Spanish-surname families have incomes of less than $3,000 per year. Throughout the Nation forty-nine percent of all Negro families fall within this classification and perhaps our most impoverished minority, the American Indian, has a total of fifty-four percent poor family units. Remember, as I said earlier, Harrington contends that we missed a large proportion of the poor people in this country, and he begins to cite a variety of groups which make up this overall population of the poor. First of all, there are the minority who are very visible. Most people, I think, would assume that you would find a high level of poverty among minority groups. There are also migrant workers who are very poor, and who generally are not called to the public's attention until there comes someone who is very daring like the late Edward R. Murrow was in presenting his "Harvest of Shame" documentary on farm conditions. This is a group that Harrington contends most people would not count in their statistics and would not even see because of their geographical isolation. Another group of poor people in the country would be old people, living on small pensions or on social security. Millions of people are hidden in this particular category. There is also another interesting category which Harrington lists; this would be the adolescents, the drop-outs, and the high school graduates who cannot find work or who find themselves in dead-end jobs with very low pay. They also constitute another group of the poor in this country. Then he goes on to cite the outcasts. The alcoholics, the skid-row bums, the hobos, the dope-addicts; those people who have in a sense retreated from reality and who live on a very minimal subsistance basis. Finally, he cites the voluntary poor. Maybe you never thought of including people like this, but there are people who are poor who reject the system and who reject work--this is the traditional beatnick, and Harrington cites this group as one which would fall into the group of the voluntary poor.

Why don't we see all the poor people in this country? First of all, Harrington contends that we isolate the poor. Even when we try to provide better housing for poor people we build it right where the old houses were. We try to keep them away from the nice shining communities and from the nice twenty-story high-rise buildings. We build barriers between ourselves and the poor. Traditionally everyone who goes to work via freeway or his favorite street, very seldom cuts through a ghetto, or through a slum, or through a really depressed area populated by Whites. Most people steer clear of these things. Consequently, we simply do not see them because our routes do not take us near them. Take the case of migratory workers. It is very difficult to get a feel for the conditions under which farm workers must live unless one gets off of the freeway, unless one drives out into the field and finds just where these people live, and looks at the tin shacks, or the cardboard shacks, or the railroad cars in which families live--not just for months, but for years. Another reason that we do not see them (Mr. Harrington contends) is that we have the best dressed poor people in the world. If you go into another country, it is probably very easy to pick out the people who are poor because their clothes carry this badge of poverty. Their clothes are dirty, and in tatters. But in this country, it is very difficult to tell a person by his clothes because for every I. Magnin dress there is a Sears copy. If you can't afford Sears copies, there are enough Goodwill stores where you can buy a dress for $1.50; or an evening dress so a girl can graduate from high school. Our poor are so well dressed, he contends, that most of us are never really able to look at a person and say, "that person is a poor person."

Another reason is that a lot of people will assume the number of individuals who are really poor in this country is not very large and that for those who do exist there are a number of agencies which are taking care of them. If the Social Welfare Agencies or the Social Service Agencies tried to help every poor person in this country they would break down in one day for lack of staff as well as lack of money. There are just that many poor people in the country.

Those, then, are some of the reasons why we do not see the poor. The poor in this country are large numbers of individuals, anywhere from thirty to fifty million people. Many of them live in cities. A large proportion of this number would be members of ethnic minority groups. Many of them would be people coming into urban areas for the first time. Many individuals who would not know how to cope with the sophisticated urban environment.

How does poverty affect people? What does it mean to be poor? I think the first thing that the poor person has to cope with is a lack of resources: of money, of capital, and of assets which would allow him to maintain a decent standard of living. First of all, this lack of resources automatically sentences a person to live under certain conditions: to live in slums, to live in low-cost, often very much dilapidated housing, and in depressed neighborhoods. This is the first outcome of being poor.

I have been the leader, this year, of a group of community workers for the Social Welfare extension at the University, and in this group we have had professionals, teachers, administrators, and school community workers who were indigenous people from low-income communities. We talked about the problem that they had as they tried to work between the schools and the families in these neighborhoods. And we tried to work through these problems and to gain understanding about what each segment of the group was doing. I will never forget the statement made one day by one of the mothers who was a school community worker. I think that perhaps she stated the effects of poverty far better than I had ever heard it before. One teacher was speculating on why, if these youngsters were so poor, they always seemed to have some money. She said, "Well you have to realize that these parents can't do many things for their children, but perhaps one thing they can do is to see that their youngsters have ten or fifteen cents a day. That ten or fifteen cents a day allows these youngsters to buy a can of soda water, or a candy bar, etc., which are highly visible symbols of having something. They are highly filling items too, unfortunately, and in a sense these youngsters are not cut off from their peers when they are able to go to the stores or to the snack bar to buy something. Consequently, what may seem to be a surplus may be the only thing that a parent can do for a child." And she went on to say, "Now take my own particular case. My husband is a laborer, and we have no guarantee as to how long he will be working. He may be working for a period of six months, three months, four months: if there is a slump in the market or a strike he may not work for almost a year, and we cannot plan anything. We cannot plan what our family is going to be doing next year. We cannot plan ahead as to what new things we would like to accumulate. Much of our time--," she said, "is spent simply in trying to survive and to make it."

This is one of the great burdens that the poor must face, and I will talk about this in detail in just a moment.

Because people who are poor are sentenced to live in areas such as I described, they also are exposed to a variety of conditions which go along with poverty, with rundown living conditions and with overcrowding. They are forced to live in a situation in which, in many cases, vice is a rampant thing. I grew up here in San Francisco for a portion of my life and lived in the Fillmore District during World War II. There never was a more vice-ridden area than that section of town. There was gambling; there was a Chinese lottery going on at that time; prostitutes were as thick as flies on the main street. This was the kind of environment in which I grew up. There would be murders, robberies, fights, all these kinds of things: it was not unusual to see something like this happen on any day, to see someone's face down in the gutter who had been shot because he had lost in a dice game in the back of a store somewhere, or see people running up and down the street after each other with knives or guns. This kind of environment is one which is the complete opposite of what is considered to be a wholesome environment in our times and in our society.

There are all kinds of institutions which, in a sense, also educate young people. The bars, and the pool-halls and also the people who seem to have made it educate children. In this kindof setting, individuals who make their living by very shady means have money, cars, and good clothes. Now this is very important because in a sense these are models of respect for young people. A youngster can see his father take his work-pail and go out the door every day and come back tired, day after day, month after month, year after year and he sees that his father doesn't get a promotion. I heard my father complain about being passed over for promotion. At the same time there is someone who is known to be a great hustler, and by this I mean a person who makes his living by not working. He engages in all kinds of shady practices--these practices may be gambling, handling hot goods, stealing, or pushing dope, but he is able to accumulate a good car, good clothes, and all these things, and he does this while laughing at the total system's conception of labor and work and honest effort. In a sense people like this serve as models for kids who grow up in the area. I knew five young men of my own age group in the City of San Francisco between 1943 and 1947 who were found somewhere in that area with foam on their mouths from dope, dead. These were the youngsters I'm speaking about. You could see them. They would start wearing the flashy clothes, and they would start having more money than anyone should have at that time: they would kind of cut themselves off from everyone else, and they'd get caught up in this very vicious circle of crime, of narcotics, and of the narcotics business. I have a cousin who is in Folsom this evening, there for the third time, who every time he came out of that place, would be back pushing, and selling, and using this kind of material. At any rate, this environment drives many people into shady types of activities. I think that it exposes children and adolescents to things which are not very wholesome.

Another effect of poverty, one which I think is very, very important, is that when you're reared in isolation, that is, in a poor community such as the one I have described, you think it is all there is. It may be a Negro-dominated community like the Fillmore, or West Oakland, or it may be a banio outside of Stockton.

The young person in this kind of an area probably never gets outside or has much contact with other individuals who live in different circumstances, and this becomes reality for him. This is what is real. He can look at T.V. and see Beverly Hills, and he can see Walnut Creek on a news documentary. But that is another world, somewhere else, a world which he can never be a part of, (he thinks); a world which does not even seem real. It is very unreal when he knows that in his place there are problems with water, roaches, noise, and cleanliness. That which is different from this is something that one may think about, but one can never relate to, or empathize with because one has never experienced it, or can hope to experience it either. He does not see himself as having a chance to do this. If this is reality for youngsters, it means that the people one sees who serve as models for him are examples of real people, and the real people demonstrate the potential of what he can become.

Consequently, youngsters in areas like this have little or no contact with individuals (except with teachers, perhaps) for whom education has meant something. My first contact of any degree of intimacy with a person who was a college graduate was with a gentleman here in San Francisco who ran a drugstore. I would occasionally go over and clean up the place for him. If he had to go out to dinner I would stay and wait on the store for him. I was about fifteen years of age when I met the first Negro person with whom I could talk who had gone to college, and for whom college had been a very significant experience. Numbers of youngsters live in this kind of isolation when they grow up in such situations.

Another problem of poverty which affects families as well as individuals is that it leaves little time or energy. If you are poor and you must work hard, you have little time for self-improvement, study, or trying to help your youngsters. This is a product of what people call "here and now" orientation. Allison Davis talked about this in his book, Social Class Influence on Learning. People who have little money and who are from low-income groups tend to evidence what seems to middle-class people a very bizarre pattern of behavior. If they come up on some money, they "blow it"; they may spend it all before they come home from the pay window. They engage in partying and conspicuous consumption of goods, clothes and cars. People who have no hope of anything in the future tend to concentrate all of their efforts upon now. A bird in the hand is better than one in the bush. There is a lot of research done on this particular phenomenon, and I will cite some when I talk about educational problems in just a moment. Basically the emphasis is upon making it. If you are familiar with the colloquialisms of Negro speech which we sometimes use when talking with one another, one phrase of greeting is to say, "Well, how is it going, man?" and he'll say, "Well, I'm just making it." "Just making it" means that I'm not making any progress, I'm not going back downhill, but I'm just holding my own. I'm treading water against the tides of adversity which sweep around me. "Making it" literally means that you are just able to hold your own.

Another problem of poverty is that it places all kinds of stress upon the family unit. Those families who live in the kinds of neighborhood about which I have been speaking, those people who must live there and try to raise children there, are subjected to a variety of stresses, not only a lack of resources. One thing, which is perhaps the most damaging thing about being poor, is that it tends to increase the chances that one's offspring and their offspring will also be poor. Now I'm not saying people don't escape from what is known as the vicious cycle, but there is this tendency if they happen to be from a family of little educational attainment and little development of job skills. The youngsters, for reasons about which we will talk later, tend in far greater numbers to reflect or copy this pattern of behavior. They probably quit school earlier, marry earlier, divorce earlier, desert earlier, have children earlier, and their children are caught up in this very same vicious cycle, which goes on for generation after generation. This is not a phenomenon by the way which is restricted to any one racial group. This is one of those things which one can observe in the case of any group of individuals who can be classified as lower class, economically, and by levels of educational attainment.

One problem that poverty makes for families involves the roles which males must play. In my group, for example, it is probably far easier for any woman at any time to get some kind of work than it is for a man. My mother, for example, during the depression years, could always work as a domestic for $1.00 a day and carfare, while my father couldn't get on a W.P.A. project at times. I was just back in Alabama recently and there was a strike. People were trying to organize the domestic workers down there. What they were contesting was the fact that they felt that $3.50 a day and carfare was too low. There are still people, women, who work for salaries like this in this country. This means that men do not have equal opportunity for employment; that men in many cases cannot fulfill the roles that this society expects of them as providers and protectors of their families. This leads to many psychological problems for men who cannot play the role that is demanded and expected of them.

It is true that in some cases it is probably far more advantageous for a man to desert or leave his family officially so that they then become eligible for some kind of assistance than for him to stay there and to go out and not find work. Also, in any low-income group, and in minority groups in particular, there tends to be also a high rate of family break-up. If you read the recent issue of Look magazine which had a feature on the Negro family, I think this was very clearly spelled out. For example, in 1962 the Department of Health, Education and Welfare pointed out that of all White children in this country who were 18 years of age or younger, at that time, 83% of them lived in families where they had both parents (this could have been a step-mother or a step-father but there were male and female figures in the family). In the case of non-White youngsters, of whom you can assume the major proportion were Negroes, only 63.4% lived in families. In my group we had twice as many family units headed by females as did the Caucasian group. This means that the person society expects to be the protectoress, the person who stays home to rear the children, suddenly has the burden of being both male and female, the burden of having to try to keep a family together and at the same time to go out and to try to support them. In 1960 in the Bay Area alone, of the Negro women who worked, over 50.2% worked as Domestics.

This is another form of poverty that you do not see. Unless you get up in the mornings around 7:00 o'clock at the major transfer points which lead in to the high income areas or the middle-class areas you will not see this phenomenon. If you get up that early and go to the major transfer points such as University and Shattuck at Berkeley, you can see as many as fifty to seventy-five women in their domestic uniforms, in their white dresses, going out to be a housekeeper or maid. This happens early in the morning before people see it, and sometimes late in the afternoon after they have left their own work and gone home. Thus economic factors combine to put stress upon the family unit.

This leads to development of another phenomenon which is of great concern, and this is the extended family. There are two types of families usually described by anthropologists talking about families in the Western world. One is the nuclear family which includes a mother and father and their children with no other relatives. The extended family is one that has a mother and a father and their children but also other relatives who have moved in with the family unit. I remember at times that my grandmother's home, which was adjacent to ours, would have as few as four people in it, and sometimes, it would have fifteen. It varied according to what the problems were throughout the clan. If Ollie couldn't get along with her husband, she could bring along her children and stay there until they worked out the problem. If someone else had an illegitimate child this was the place where the child was brought up. Thus the extended family is the kind of social adjustment which people make to all kinds of pressures, and particularly to poverty.

This has several positive factors in it. First of all there is a kind of a built-in welfare unit where people really help themselves in very subtle ways; it also means that a person always has a place to which he can go; where someone will help him over his difficulties: with personal therapy, with money, with clothes or what have you until he can get himself straight. It also has some negative factors related to it. First of all there is the matter of crowding and lack of privacy from which the middle-class home does not suffer. It also means, in many cases, that children living in such units are exposed to many facets of life far too early. They see people when they are angry with each other. They see people in their more intimate moments when probably these things should not be seen by young children. They are also aware of the bad things that are happening to people and they hear about all of these things.

One of the problems when you have broken families or extended families like this is the great demand for self-reliance upon the part of the youngsters. In other words, to be able to take care of yourself early is a requirement of most low-income children. There is a very good film on video tape entitled Marked For Failure which deals with the schools in New York City. There is one passage in which a man is talking about the children in New York City, and he points out that when mothers have to go out and work, the older child then must become the parent's substitute, and his badge of authority is the apartment key. He has the responsibility of getting out of school and rounding up his brothers and sisters if they are in other schools, bringing them home and being the parent figure until the mother or father gets there. The youngsters are also expected to look out for themselves on the street and to be able to fight if necessary, which is one of those things we will talk about later and which poses problems with those of us in schools and other institutions. As Dr. Shapiro says in this particular film, Marked For Failure: "One thing that perhaps attributes to man's being the smartest of all animals is the fact that he has such a long childhood in which he can grow up and be a baby and be cared for, and learn about things, etc." He points out, for instance, that the chicken has a shorter childhood and is the dumbest of all living things. He contends that children who live in impoverished areas must grow up too quickly. They do not have enough time to interact with adults so that they can be curious, so they can find out about things. How can a child ask a mother questions when the mother happens to be in someone else's home answering those children's questions? This poses a tremendous problem.

Another negative factor associated with the extended family is that it leads to a kind of lack of self-analysis or introspection. One doesn't look at himself so much from a critical point of view if he is a failure in life or if he is not making a go of things. The one thing that drives middle-class individuals, and this is something that is internalized very early, is the inbred assumption that you will succeed at something. For a middle-class youngster to suddenly appear back at his parent's house and tell them that he does not have a job, and ask what is he going to do poses all kinds of problems. If he is a college graduate and he comes home, that makes it worse. People ask "When are you going to do something," or "What are you going to do with yourself?" Or, "Do you have any ideas," or "What are your plans?" Actually such a person would feel very guilty if he was not contributing something or showing that he was capable of doing something. You see people who are in positions where they are mired down and can't move up. Maybe someone who is better is standing in the way or they are being passed over. These cause all kinds of psychological problems for people who cannot cope with the fact that they are not moving ahead in a productive way. An extended family can shelter people from this. If you're out of work you can get a job some other time, but in the meantime, you know you're going to eat and people are going to share things with you, and there is an absence of that guilt which in many cases drives the so-called "strivers and strainers" which is the title applied to some middle-class individuals.

Some people contend that this is the ultimate flaw of the extended family; it does provide this kind of sheltering and it does not provide this kind of critical attitude about one's failures so it tends to lower one's ambitions and aspirations. If one knows that he can fall back upon his friends then he doesn't really become hungry to achieve something or to do something. or to take chances or risks. Anyone who works in employment with low-income individuals will find that there are people who are quite well qualified to take the job which involves certain risks, but they bypass this job to take something else which is non-threatening; where they can do the work without competing with someone else. This poses all kinds of problems. I think the thing about poverty and living in an impoverished environment which has the most negative effect is the effect that such choices have upon the images of the inhabitants in such areas. If, as I said before, my neighborhood--which was a ghetto--is the real world for me, and if the people I see in this environment are the people who have achieved or who have reached whatever pinnacles society has allowed them to reach; if these are the people who are real for me, I judge myself or view myself in light of these people who are most intimately associated with me. Consequently, one tends to develop a perception of himself which is less favorable than that which is developed by persons exposed to a variety of people. I can tell you very honestly, from my own experiences as a Negro, I never thought fifteen years ago or twenty years ago that I would be standing at San Francisco State College (which existed in those days) talking to a group of people. I never thought that I would have a Ph.D. degree, and when I started out on the program I was certain that I was going to fail, and my good buddies would cheer me up and say, "Look, man you've got to make it, you've got no choice." We'd have all these talks with each other. I went to Cal with five very good friends. One of my friends is Judge Bruce Saul over in Piedmont, and one is a psychiatrist in Los Angeles and another is a psychiatrist here in the area; one is a specialist here in E.N.T., and another is a Pharmacist, he has a doctorate in Pharmacy and is a rather successful businessman in this area. We always would say to each other--and we were serious at Cal--after we came out of finals, "Man, I don't know what I'm doing here!" We would really say, "Those White kids in those classes, why they know everything! I feel so out of place in this place, I'm going to quit." We would always threaten to quit but someone would always say, "You know you can't do that." And that would pass. But there was a basic assumption that you probably didn't have a chance to make it. And I've seen people pass up some tremendous opportunities. I've probably passed up some myself because I wasn't willing to take the chances involved. There can be a self-fulfilling prophecy which is based upon one's experiences and one's perceptions of reality. It goes something like this: As I look at myself, I don't think that I can become a doctor because my Dad isn't a doctor, he doesn't have any money, he didn't go to college, it takes a lot of money to go to college, etc. Consequently, what happens is that people tend, consciously or unconsciously, to pattern their lives in such a way that they make their predictions come true. I'm going to talk about this same phenomenon as it applies to those of us who work with young people, too, because I think we make predictions about children and we can make them come true too, depending upon how we teach them and what standards we hold up to them, and what expectations we have for them.

There is one other thing that poverty does to people: it alienates people from the main stream of society. One does not feel a part of society. If you listened to and read what people were saying in Harlem and Watts and in Bedford Stuyvesant after the riots the thing that really came through from the men in their early twenties and late teens was this, "Man I'm dead psychologically! I'm not a part of this system. Nobody cares about me. You know the only time they pay some attention to me is when the whole thing is threatened." And there is a complete lack of identification with anything outside of the Ghetto and the whole condition of poverty. There is alienation that people feel and it starts very early. It starts as early as three, if not earlier than that. Watch children play, hear what they say, watch how they react toward each other. I think there are significant lessons to be learned even from two-year olds about alienation and awareness of differences in society.

Well now to the final question: What are some of the educational problems which are related to this whole matter of poverty? First of all, when you realize that when people are poor they do not have the resources to expend on a variety of things, you can assume that the youngsters in these families are going to have less readiness or less prior experiences which would enhance their chances of being good learners in school. In other words, their experiences prior to coming to school are quite limited. In a study done in Chicago there were some youngsters who had never been more than twenty-five blocks from their home, and these were kids who were in junior high school. There were some youngsters in Oakland the other day, who were on a field trip, who had never been to San Francisco in their lives, and they were born in Oakland. These things happen all the time. Some of them have never seen Golden Gate Park or the Zoo, or the Planetarium or things like this which middle-class parents do for their children at least once a month, if not more frequently than that. This is one problem. Lack of resources means that parents have far less money for toys and readiness activities that economically more favored individuals can procure for their children.

In many cases in socially disadvantaged groups there is practiced a form of language which is the opposite of what is expected of people in the total society, and in particular, in school. It is what some people would call formal vs informal language, or simple vs complex language. Language is very important, because there is no more highly verbal a place than a school. Almost everything you do involves words. What we are beginning to realize is that when you think a thought, you think in terms of words. Consequently the extent to which you know words and can use words determines what some people will feel is your capacity or ability to think in complex or varied ways. If you have a limited use of language or if the pattern of language which you've learned is not compatible with what is necessary for success in academic areas one is handicapped when he listens to this new language, when he trys to think through this process, and when he trys to work with this kind of language. This is a major problem. We now find people talking about teaching English as a second language to some youngsters who speak English--but they are talking about formal English. And there are all kinds of programs which are making use of language labs in which they take youngsters at three and put earphones on them so that they can hear the kinds of speech that they will hear in school. I'm going to talk about why some of these things are necessary.

I think one big problem which involves the whole area of poverty centers around the relationships which exist between parents and children. Parents are perhaps the most significant adults in the lives of people; after all, we are around them more than any other adults, they are the ones who punish us, reward us, love us, and share with us. Therefore we identify much more closely with them than we are willing to admit. There are all kinds of psychological studies on what they call "identification." Studies to see how similar a person's behavior is to the ways in which his parents behaved toward him, and some people would contend that we treat our children the way our parents treated us. You may want to think about that if you have children. We treat students, too, the same ways in which our parents treated us. While I think the relationship between parent and child is very important, it is particularly important in this area of language development.

Hess and Shipman at Chicago are doing a seven-year study in which they bring together mothers from working class, low-income families and their children in a lab setting; they give them problems to work out, and they listen to what the mothers say to their youngsters. They also bring in mothers from professional groups, and they listen to what they say as they explain and try to help their youngsters with problems. What they find is that there is a much more complex language used by mothers who have more education, who come from higher income families; they find that they will tend to explain more to their children; they will ask if he understands. They will also give a youngster a variety of subtle clues as to how he should do these things. In the case of the low income mother, she will attempt to explain it briefly, and if the youngster doesn't get it, she will do it herself; that is, demonstrate it herself, rather than explain and help the youngster work through the problem. What they are beginning to find is that when you look at these youngsters in other problem-solving situations, those youngsters whose mothers engage in more dialogue with them tend to be far better problem-solvers, and can be much better workers on their own than those youngsters whose mothers tend to be curt, short, and not extensive in what they say to the children. This, I think, is why we are beginning to realize, especially in preschool education, that we are going to have to get the mothers involved in this whole thing too, and possibly the whole family, if this is ever possible. Where there is the problem of broken homes, of mothers having to work, a youngster has less opportunity to interact with his parents and test reality. For example, my youngest son asked me a question this afternoon, "Daddy, do the stars shine like the moon shines because the sun shines?" This led to a discussion of the fact that stars are burning fires like our sun and that the moon really does not have any fire, it simply reflects the light of the sun, and why you can't see the moon at times. Now he may not have grasped all of this but this was about a fifteen minute discussion. Sometimes parents who know that they should do these things are too tired to engage in this kind of 500 question dialogue with the kids and don't. But this kind of thing is very important for a kid to test reality. Testing his assumptions about what really exists against an adult or with an adult who is sympathetic or who can steer him toward the proper knowledge in these circumstances is important. This is missing in impoverished homes where there may not be a father around or the mother may be too tired, and she has two or three other youngsters to take care of in addition. One result which comes out of the lack of parent-child contact is that youngsters who are disadvantaged tend not to listen and to hear things. Not that they can't hear, they seem to listen and seem to be able to tune out verbal communication. I've seen this myself. I've see a teacher stand up and give an assignment; the students were not horsing around or looking around, but looking at the teacher, and the teacher will say, "Mary, what did I say?" "Huh, I don't know." These are high school youngsters, not being inattentive as far as behavior, but as far as hearing what is going on. There was no discussion of what was being said at this time.

One other major problem which comes out of poverty is the problem with authority. One thing that poor people feel very strongly is that they are put upon. The police are always after them, and I think that they have some rights in this respect. I've never been arrested yet; however, I've been stopped a number of times, and I've been embarrassed a number of times, simply because I may have been in a ragged car or not all the lights were functioning, or I was standing on a street corner and I looked suspicious. People tend to look upon schools, welfare agencies, and police officers as outsiders and as representatives of a greater authority which can just come in and control them without their being able to do anything about it. You have to realize this because institutions are traditionally outside institutions. The buildings may be in the community but the people who operate these buildings and who carry out the laws and regulations, are not themselves part of the community. They are seen as some great body or cadre of people who come in with great power and they tell you to fix your house up or they are going to cut off your welfare payments, or they are going to put you back in jail if you don't stop this, or you better pay your wife her alimony or something. All these people who are poor tend to feel that they are outsiders; they have problems with authority. This is particularly true with young people. In a hostile environment one has plenty of opportunity to see people handle threats in an aggressive fashion. One learns to fight very early if he lives in a poor neighborhood and he'd better learn how to fight or at least he'd better not be afraid to fight even though he knows he is going to lose. In my particular elementary school if one did this you had better show up two blocks from the school on your way home and you'd better not try to duck someone. Even if he outweighed you by fifty pounds--because you would have no peace, because they would keep after you until they got you, and you would have to fight sooner or later--the thing to do was to march out there and take your beating.

This goes back, I think, to a kind of philosophy which permeates certain low income areas, which is: don't let anyone push you around. It's a great quest for autonomy--you're just as good and tough as anyone else and no-one can really take you if you try. Consequently what happens is that parents will tell youngsters, "Don't you let that boy hit you, if he hits you you hit him back." They will always preface this with, "Don't start a fight, but if someone hits you you get him." Whereas in school we say, "If you fight, period, you get suspended." You know,"don't fight." And yet, he knows that in his peer group he'd better fight. You know, so and so is saying this about you and you know you aren't going to take that, and everyone eggs everyone else on to fight. The big problem in low income families because, in many cases, there is absence of dialogue between parents and youngsters. Efforts to get good behavior out of youngsters comes in the form of shouting commands or threats but never explanations of why you should do this and why you are being punished. Consequently what happens is that the people who come from poor environments have limited exposure to seeing things from two or three different points of view. For example, let's say two boys get into a fight. "What did you fight for?" "Well he called me a name," or "he said something about my mother so I hit him." "Well you shouldn't fight." Maybe the youngster is punished right there if he did start a fight. In the middle class home or in any home where the parents see the necessity of trying to plan other courses of behavior, the question is..."Well, why did you...maybe two fellas did exchange...but the question is asked why did you fight?" "Well he said something about me." "Is that the only way that you could have settled that?" "What else could you have done?" "Well you could have gone and told the teacher, couldn't you?" "You could have walked away, couldn't you?" "You could have told them that it is not true and it doesn't matter." But what happens with youngsters in a poor environment is that they are expected to act very quickly, and they have not been helped with seeing alternative ways of coping with problems and threats, and so consequently, the only way out is by counter-hostility.

A teacher says something to you and you are obligated to come right back. You are obligated to come right back because there is a phenomenon which takes place in low income communities, and this is true of low income Italian communities, Mexican-American communities, and Negroes, which is known as "addiction to the peer group." In other words when youngsters must be cut off very early from contacts with their parents, or where they have limited opportunities to interact with their parents, or where there is lack of availability of parents, there is a tendency for one's own buddies to become far more important as a source of prestige and recognition than adults. Consequently you will see a youngster who will get involved and I've seen this happen in several junior high schools, in verbal hassels with the teacher. He won't back down, and he will keep this up until the teacher has to send him to the office; he does this because his peer group code expects him to do this. A teacher could handle this differently by taking this youngster outside, and that youngster would be completely different without his audience; but you let him have his audience, and you let him be there where it is expected if the teacher says something to you, man, you don't take it. When that heppens he is obligated, because of the code which young people adhere to--to follow through even if it means suspension. He doesn't really want to be suspended. I suspect that most youngsters do not want to be.

One other big problem is something that goes back to "making it" in the here and now. This is the lack of ability to delay gratification. There have been all kinds of studies in which youngsters who come from poor environments are asked would they want something now if they had done a task or a little work; do you want this now, or if you wait until next week we will give you twice as much. They ask the middle class youngster the same thing. Well, the middle-class kids are far more willing to wait until the next week to receive more of the particular thing that is being offered to them than the poor youngsters. They want it now. In other words, if you offer a youngster a five-cent Hershey bar now versus a twenty-five cent Hershey bar next week, more poor youngsters will take the five-cent Hershey bar right now. They may be hungry or it may be a lack of confidence in the person who is offering this to them, but there is a tendency to get what you can get now.

Remember that much of what we do in education involves delaying. If you are going to be a college graduate you have got to put in sixteen plus years in school. If you are going to be a Ph.D., it is going to take you anywhere from eighteen to twenty-four years, and an M.D., is going to take you anywhere from twenty-two to twenty-six years if you are going to be a specialist. The problem of a lack of ability to delay gratification, a tendency to want things now, not being willing to put off and to sacrifice for something is present because they have never seen why sacrificing for something has ever paid off. They live in families where people can't save money, because there is no money to save. They are not trained to delay gratification.

There is an idea that youngsters who come from families which are not highly verbal tend to be far better learners when it comes to teaching and approaching things on the basis of concrete examples. In other words, their learning styles will stress concrete learning vs abstract learning initially when the ideal should be to move from the concrete to the abstract. They have had a lack of models who have succeeded in educational attainment. Unless a youngster can identify with the teacher, or someone in the whole educational process, there will probably be less opportunity for him to come in contact with a person for whom education means something. Teachers or workers with children have a very important role to play as the examples of people who have taken an interest in learning, who like it, and who are individuals for whom it has meant something significant. In other words, teachers can serve as models for them.

Finally, I think that there are certain problems that youngsters who are poor have with those of us who are educators as well as with institutions called schools. Many people who go into teaching in schools located in poor environments encounter what some people call a "clash of cultures." The value of fighting and aggressive behavior, for example, is something that shocks many people. Another example is the tendency to engage in verbal harassment of each other. The name calling--calling each other the most vile names that you can think of-calling each other animals and things like that--talking about each other's mother (which is known as dozen playing)--these are things that teachers cannot understand when they hear youngsters or minority groups use all the derogatory names which the broader society uses about them against each other. There are all kinds of ways in which the values of educators clash with values of the youngsters. Consequently, it is very important, I think, for those of us who work in the educational establishment to become very quickly aware of the sub-cultures with which we will be working, the ways of life from which the kids come. Try to understand those attitudes and behaviors. They are what they have learned and at that moment, to them are real.

Now, I'm not saying that we should overlook cursing, swearing, fighting, and things like this. We shouldn't; but we should understand it, and we should help youngsters to work from this point forward, to be able to be accepted by the broader society rather than to be cut off. We people in education tend to go on the basis of what we know without considering each individual as a separate case, and as a unique dynamic human being. It is very easy for us to stereotype and to over-categorize youngsters. To the extent that we say these youngsters are poor, that they come from homes which are no good, that their parents don't care, that they all are dumb, that they are not going to learn, we err. This comes out in a variety of ways; in the upper grades. "They can't study because there are too many people in their homes and no private room where they can study; they can't even afford a pencil and so consequently I'm not going to give them any homework." This is a youngster who is already two or three grades behind. This is the kind of a thing that can happen.

Let me document this with one little story. There was a study in which two groups of students were told, "We're going to let you or ask you to take these rats and to teach them to run this maze." They told one group, "You have the best rats that were ever bred in this laboratory. These rats are the product of sixty generations of selected breeding, they are smart rats, so you shouldn't have any problems teaching them to run the maze." But over there, unfortunately, you have our cull rats. You are going to have trouble teaching these rats to run this maze." And so they then let them start to try teaching the rats to run the maze. And you can imagine which group's rats learned to run the maze the quickest. Group I did because they entered the process with a higher set of expectations.

In closing, I would hope that those of you who work with youngsters who come from these environments will, during the course of this experience, open yourselves to learning as much as you can about poverty, learning as much as you can about various ethnic and racial groups, opening yourselves to the development of a deeper understanding of not only the differences which exist among mankind, but also, I would hope, the commonalities which exist among all of us.

And with that I would like to wish you all a very pleasant learning experience and a very good summer. Thank you.

HEAD START: FROM THE PUBLIC HEALTH VIEWPOINT

Dr. Donald Freedman, M.D., Medical Coordinator
Community Action Program, San Francisco

Good afternoon. I am pleased to talk with you even though I don't know each of your names--at least I know something about your interests and I hope before I'm through that you will know something about my interest in the health of children. It may be rather unnecessary to say that I feel we are concerned to the extent that any child who is given the benefit of a complete type of health screening at this stage, at this time of life, at this particular year, in our century, has just that much better opportunity or chance of making a success of things in his own specific way. There are enough handicaps in life without taking on the added one of starting off with various types of health limitations or disabilities, particularly when we have the know-how to discover, to uncover, or at least to try to reveal many of these. Now what are they--or what might they be, specifically? It would be possible to enumerate in a statistical sense the proportion of children in this age group and social class who have visual defects and hearing limitations, hearing loss and other physical abnormalities or illness.

But rather than devote time to that I'd simply like to put it in a more positive way. And that is that we start from scratch; we start with the child (all those coming into the program) and we intend, or at least our hopes include, getting a complete medical evaluation of all of them. This will be hard enough to accomplish by itself because of what you know: some people won't come or continue to come to school throughout the summer or parents will be unavailable to provide some of the medical history or give the approval for us to examine or immunize. We're not going to put a needle in or take a drop of blood out without a consent from the parent or a responsible person, and this is going to be another problem for some. But in the case of those for whom we can get this sort of approval we would like to follow this general pattern:

The child would be examined by an expert in vision so we would know something about any visual defects or limitations. The child will also be examined dentally. (Each of these examinations is by a different person, incidentally, so we're setting it up as a team operation, really.) We will have an examination that will tell us something about his hearing. Audiometry will be done--this by another specialist, an Audiometrist. If there is any indication at all that there is a speech problem (speech pathology), this might be discovered by the pediatrician or the hearing person, who in our instance will know a good deal about speech also. Then this might lead to further study or certainly treatment of any speech abnormality (which is not always easy to determine on the surface). Then, going beyond those examinations, we will do a certain amount of laboratory work so as to uncover a few of the major, easily discovered conditions which might be revealed by a hemoglobin test, for anemia, for example. And we will do a urine analysis for what abnormalities can be discovered there. Then as we go on through the series of steps--the child will have a medical history recorded; that is, something about his developmental history, his growth, any problems at birth, significant past medical illnesses and surgery; and particularly any of the growing problems which might be related to metabolism, difficulties with food and elimination, and mental development. There might be some problem. It might come through the mother's telling of the story or it might come through reports from hospitals, clinics or other agencies that have had contact with this child. So what I'm saying is that we are going to seek all of the information that we can get on each child from the outside sources and the family, as well as what we can see with our own eyes, ears, and machines. Now finally, when we have all of that collected and assembled which we expect or feel is important (if not before school starts, certainly in the earliest weeks), then we will carry on with an examination by the physician. In many areas it will be a general practitioner who is accustomed to examining and treating children, and in others it will be a pediatrician. Whichever it is there will be additional findings revealed that will be significant.

Now one last part to fill in the picture of how we find out about this child. One of the important things that I'm sure you recognize has to do with the prevention of illness, the immunization process, and particularly the history of various communicable diseases. For example--given a child who has had a particular disease--say measles--in the past, we might a little better anticipate the possibility that there could be a hearing loss. In addition, if we are thinking about preventing polio and measles and whatever other conditions can be prevented, then we are going to make a definite attempt to bring each of these children up to date with regard to all of the immunizations that they should have at this age. The whole series of dyptheria, pertussis, and tetanus immunizations; smallpox vaccination, polio virus (which is given, as you know, in several different forms, although currently it's mostly done orally); finally measles vaccine (which is a more recent development and which is now given frequently to children of this age). We want to have all of the children protected with these particular biological substances. It may be difficult to find out, in some cases, whether or not the child has had certain ones or perhaps all of these and you might raise the question, "Suppose we don't know?" If there is no parent available or one who can give relaible information, or if the health department does not have such a record (although many health departments will have a fairly complete record on some of these children)--there is no harm in duplicating and repeating, even if the child had a smallpox vaccination last year, or DPT (which perhaps you know as Dyptheria-Pertussis-Tetanus vaccine). Even if that has been given one or two years ago, it can be given again. So we like to err on the side of safety, rather than on the side of chance. One of the problems in immunization, however, is that all of these cannot be given at one time, so that there may be as many as four and five substances to be given. Three can be given today, but the other one or two have to wait for a month. In other words, we do not give two live viruses at the same time. We can give one live virus like the polio one, and then another one a month later, so just in terms of future handling of the children you might anticipate this, that it cannot be done all at once and if the child therefore is going to have an examination and some of the immunizations today, then you know he should have another call out of your classroom a month later to do the full job.

Perhaps we should forsee now what happens to all this information. I think that the approach to that is this. These are persons who are not "motivated" (just to use a term that many of us are familiar with but which can be very misleading) or persons who are not familiar with health services and personnel as some of us know them, and particularly are not familiar with the private physician whom you go to anytime you or your child is ill. Sometimes you can go without an appointment created weeks or months ahead and always you can call the doctor on the phone day or night and expect a friendly reception. I think some of these customs and practices that a few of us in the population feel comfortable with are not necessarily the general pattern; certainly those who have been limited to clinic visits by and large do not call that doctor whom they saw at the clinic day and night when the situation arises, even for the child who is coughing. I would be very concerned if a child coughed at 2 a.m. and sounded out of the ordinary, but I think that the average low-income limited-education parent does not call anybody at 2 a.m. unless the child were desperate. So my point is--that we should be using this screening examination procedure not only to say, "See how great we are with our fine tools and personnel; we can find out almost anything about your vision and blood", but rather to say that you as a human being and your child as an important member of society are the ones whom we would like to have understand about health potential and the use of health resources, particularly the use of a relationship with a physician who cares about you and your child and who wants to be in constant contact with you day by day or week by week but who does not want you to come in only when the child is bleeding.

How do we help these persons accept this? Persons who come from a different ethnic group, a different cultural background, a different economic situation, how can we say to him that we mean what we say and that the doctors mean what they say and the dentists too? How can we say that he wants you to have good care and that he will do all that he can to make it acceptable and palatable and useable? I wish I had the answer to that question but I don't, so I pose it to you to think about. I believe that whoever is working with the health team and carries on the part of this health story that I am mentioning to you will be in contact with them and vice versa, and between you two you can approach each family appropriately. Those who need more help, more time, more hand-holding, more home visiting, more of whatever you feel might be successful without guarantees--then this would be worth your time and their time; and if we only get 5% of these families to follow through subsequently with private medical care in its highest form, then this too has been worthwhile. Hopefully it could be a lot higher than that.

I think that it's time to go on to the follow-up care because having done all this screening is of no value by itself unless there is a definite approach to following up what has been found. I should preface these remarks by saying that I have here a form, a medical report form, the title of which is "Health Record For the Preschool Child". Have any of you seen this, does this sound familiar, any hands on that? Apparently very few. Well, it's four pages like this, with a nice chart on page 2. You might see some lines going up. That is the growth and development page, where someone will enter the number of inches the child has obtained and the amount of weight at a given age; it will all be put on a graph so we can easily locate the child's development at a certain percentile. In this way we can tell rather quickly whether the child is underdeveloped or overdeveloped or within a normal range. But this form is put out from Washington and while every community in the country is not compelled to use this it's highly recommended, I think, in California, and we are utilizing it--that is, I know we are utilizing it in many of the communities in California. I think that you will and should become familiar with this. This is like a regular school health record--there will be a copy kept in the school, and perhaps a copy kept elsewhere, where ever the administrator thinks it is desirable. On the first page it states: "In the event of an emergency requiring a physician's attention and neither parent can be reached, call one of the following": and it indicates the family physician, the clinic physician, and the name of the physician who is placed here and his telephone number. We're thinking in terms of: if something does happen during the school day, then somebody should be available, or we should know whom to contact. This form will have all of the other information, including space for progress notes so that either you or the nurse or the physician or any other appropriate person can indicate something about progress throughout the eight weeks.

Now, some of this, I believe, will be notes of follow-up care. For example, after this work-up is done there will be recommendations from the whole team, the team consisting of the physician, perhaps the nurse and the social worker and the teacher--whoever is going to contribute to the findings here, anyone having anything at all to do with health. The form I have been talking about also has some of the social information on the face sheet. There will be decisions as to what specific steps need to be taken to resolve any undetermined diagnosis; for example, if there is anemia, is this severe enough to warrant any further studies to see why the child is anemic? Is he bleeding or malnourished? It may be significant or it may not be but the team has to decide what next to do: to refer him to a private physician, perhaps his family doctor (which some of these children might have) or a clinic to find out what the problem is and what treatment is needed. Or it may be a question of surgery; there may be a question simply of treatment of chronic bronchitis, but a severe case, one that may require anti-biotics and blood tests to follow along. Whatever has to be done, a series of medical tests or social steps regarding housing, income, nutrition, there has to be an orderly process to follow up the decision as to which has the highest priority. I think your knowledge of the child, and to some extent of the family, may be a deciding or contributing factor in determining: should we investigate heart surgery, or some vision surgery, or a referral to some crippled children's service for a deformed foot. It could be, obviously, any number of choices, but our intent in this program this year is a single purpose one, and that is to uncover and recover: to uncover all the abnormalities of significance and to recover all of the functions that the child may have lost or may be limited in. This means, then, treatment. Many of our programs have funds for paying for treatment of any condition that the child is found to be suffering from, including dental care. This means to follow through to see that all of the treatment is secured, preferrably during the summer months; but granted there are going to be some who reach September and have not had all of their dental care completed, or have not had all of their eye examinations and treatments, or gotten their eyeglasses. As far as I know the funds that are available do not terminate on August 30th--as far as the health funds are concerned: as long as we have health funds, we will continue to purchase health care, continuing until the child has had all remediable conditions remedied.

This brings in one other element which has not been sufficiently referred to, and that is the element of helping the family to understand a little bit more of what we are trying to do and hopefully how we might try to do it better. Let's assume that we can point out unequivocally to a parent that there are specific deficits that his or her child has, whether it be in the dental, visual, abdomenal or extremities area of the body. We might feel rather strongly that this child is rather handicapped with a limp, with poor bite because of jaw formation or malocclusion of the teeth; we may feel desperately that crossed eyes or limited hearing loss can be significant and we want something done about it. Well, I wonder what the percentage will be of persons or families that will agree with us, who will take it seriously enough to ensure that something is done about it. If we were convinced, of course, that all we needed to do is drop the bombshell or drop the information and it will be picked up, then we wouldn't need to be talking much about this. If we assume, on the other hand, that the large proportion of these families, for many reasons (and we know many of them) are not going to pick up on it, then our only problem is that of helping a person to change his attitude or to understand a little more. We can do that--we may succeed, and I personally am convinced that a rather large proportion can change their attitudes. A great deal of it is very fundamental type of communication at the appropriate level rather than the dogmatic approach--an understanding approach about, say, why a better dentician would be beneficial and desirable for the child. Or perhaps it's just a matter of letting the parent talk, if the parent has some personal axe to grind with a handicapped child. But I think this again is perhaps one of the problems to be resolved in each case, and I hope that each of you will be concerned in the resolution of them so as to be able to help, even if it takes five or six visits or discussions with the parent. This is better than adopting a perhaps characteristic attitude that many of us have had in years past; that is, the attitude that if we give the information to a parent, it is then his responsibility to carry on from there; and if he doesn't, we don't care--or it's beyond our ken.

I have one other point I'm going to make after stressing this one fact. The fact is: if it does take four or five visits to understand the family's resistance to following through, then this is fine; if we learn how to achieve something in four or five visits instead of one or two, this is great. If it takes ten visits (we may not have that much time--although for some even ten visits would be possible) and we find out what happens, and we use enough ingenious approaches rather than falling back on our patterns of the past as though they were the only valid ones, then I think that we will have a few more successes than we've ever had before.

My last point is that we don't intend to do this by ourselves; we are not a large new staff filled with many highly skilled persons in the fields of psychology and medicine and hearing and psychiatry. And so we are planning to use our skill in bringing in some of the other agencies that do have something to offer. But we will be bringing them in, not on a hit or miss basis, but on a very careful selective follow-through basis. I'm thinking of some of the more obvious or less obvious organizations or service agencies, including the County Health Department; including some of the specialized clinics, such as a hearing clinic; including the crippled children's service; and also including the private dentists and the private pediatricians and many, many others to help them understand why we are devoting this much attention and time and money on a given child. If we do utilize some of these agencies, and many of them already have some information on some of these children, I think then that we can accomplish a great deal more than if we were to be foolish enough to think that simply with our funds and limited staff, in a two month period, that we are going to accomplish all of these goals by ourselves. Obviously at the end of August, or at the end of September or even October, many of these children are still going to have to be under care of other agencies for varying lengths of time, but if we leave a good taste and a good start with these agencies and these families, then more will be accomplished than if we cut it off abruptly and say, "Sorry,this is as far as our train goes, and we don't really care what happens from here on out".

HEALTH NEEDS OF THE DISADVANTAGED CHILD *

Dr. Bruce Jessup, M.D., Poverty Coordinator
State Department of Public Health, Berkeley

(*Please note: the first portion of Dr. Jessup's speech has been lost, due to technical problems during taping.)

Medicare made a massive survey of all the medical needs in California. They came up with a flat-out statement. They said (in 1960): "Quality, comprehensive medical care that was for the few that have money is a right, not a privilege, for all people of all economic groups in California." And this is now the National policy under Medicare. We're moving to assure this care to several groups, of which your children this summer are one, where they are poor (below a $3,000 income) and where they are medically indigent. They simply cannot afford quality care. So this is one barrier that is being removed, isn't it? The economic barrier is being removed from comprehensive, quality medical care for a certain group, and many of your children under ANC will fall into this group this summer. People over 65 will fall into this group in two weeks. Some of the children will not fall into this group because they are not in the category of the welfare ANC program. Arrangements can be made for these in many cases.

One of the big things that Medicare hasn't done anything about is the distribution of medical care. We all know, as we look at a district map of San Francisco, where the health problems are, don't we? The infant mortality rate is 30 in some of the census tracts in the Mission, the Western Addition, and China Town. This is what it was in Madera and Imperial County ten years ago. This is what it is in Mississippi today. We ought to get busy and straighten it out. But there are very very few pediatricians or physicians in some of these areas, so distribution, and real availability and real accessibility of medical care remain as problems. Training of more health personnel, particularly of health aides and others to extend the hands of some of the doctors who are here is also a problem. But San Francisco is unique. . .why? Because it is probably the only metropolitan area in the United States with this concentrated a population that isn't growing really fast. And it is also a geographically distinct area where things can be settled and problems can be solved. Watts, Manhattan, Western Chicago--they present very much more difficult problems.

But I think that you all are in San Francisco this summer because of the changes in the HEAD START health program; because of the nature of your particular patients or pupil group, you have remarkable opportunity to concentrate on getting full health and dental work-ups on these families. You can plan for and arrange it while you have the kids this summer, so they'll get worked up, and not only worked up but they will get their defects corrected and get a plan for comprehensive care. I for one do not subscribe to the idea that the reason that these people don't go to the doctor is because they don't know enough. I don't believe that. I think that these people don't go to the doctor because the public medical care now is fragmented, inaccessible, and rudely dispensed in public clinics--with long waits, language barriers, and sociological barriers. I think that if they had the same kind of medical care in their neighborhoods as you do for your kids, for your brothers and sisters, they would go. I think there is an educational job to be done. I think that one of the major problems, though, is to rearrange our distribution system of medical care. You have these children this summer, and I think that you have the tools with which you can help them do it.

HEALTH NEEDS OF THE DISADVANTAGED CHILD

Dr. Arnold Gilbert, M.D., Pediatrician, Maternal Child Health Division
State Department of Public Health, Sacramento

I may have some suggestions for you, but having heard Mary Lewis talk yesterday about the problems of feeding the children in the HEAD START programs powdered milk, I couldn't collect my thoughts for my talk because instead they went off to one little boy of 18 months who won't drink his own regular milk. So if any of you can feed your kids powdered milk, let me know how you do it and I would really appreciate it. This goes to say that pediatricians, even when it comes to child health problems, don't have all the answers. I think that that is going to be true for you people and the physicians and the public health people who are working in the HEAD START program: they don't have all the answers, but sometimes individuals within the programs and the projects working right with the children can come up with good ideas for individuals or for entire projects that will make a great deal of difference to the children and to their community, despite the fact that there can be no perfect answer. I think just at the start, I'd like to underscore a point that Dr. Jessup has made already: that the emphasis for the people in the HEAD START project has to be on themselves, and what they can do, what they can do within all the guidelines and within all the realities that exist in the community. I think this will make a difference in the success of these projects. There are even clinics and the medical care facilities where people have to work very hard to have it function well for the people who come. They are big, they are massive, they are impersonal; it takes someone with know-how, skill; in other words, with concern and commitment to make those big organizations work well for the people that come to them. That is true for you if you ever have occasion to go to a big place like U.C. Hospital up here on the hill; it is certainly true for people who are not as educated or as articulate as the people who are teaching and dispensing knowledge and skill or as the people who are teaching in the HEAD START programs are liable to be.

I'd like to just a minute or two talk about some of the real medical aspects of the HEAD START projects and then tell you about what we found last summer. But to begin in a more general way, I think that you people who have not worked in the HEAD START projects shouldn't get the idea that the amount of pathology and disease that you are going to find is going to be absolutely overwhelming, at least in the sense that you are going to have many problems that need immediate care, gotten at any cost, so that you must absolutely find some help for these children. I think the realistic way to look at these problems is that these children have health problems that are serious. They are serious when you look at them from the viewpoint of the person in San Francisco and Marin and San Mateo who can afford private medical care. He can take his children to a pediatrician; perhaps he has been seen by a doctor right while he was in the hospital; perhaps the doctor has made a home visit and he has seen that doctor at intervals from that point on, so that if he had an earache someone took care of it; if he had diarrhea someone took care of it; if there was a problem with constipation or bed-wetting, little problems like that, someone took care of it. Well, here you're going to be working with children who have medical problems--and a lot of the medical problems are serious. If these problems--the sort of little problems that I talked about--warrant your attention with your own children, getting them to medical care and you are willing to pay for it, then these problems are serious for these people too. A lot of these things, perhaps in a cumulative way, make a lot of difference to these children, but in general, in a lot of these HEAD START projects, I don't think that, in San Francisco at least, you are going to see some of the things that you might see with migrant workers here in California or migrant farm workers in Texas, like a clef palate that is not taken care of or a serious fever that's never been treated. You will see some of this but it's not the dramatic or flagrant things; it's the accumulation of little things, I think, that with some more serious and obvious exceptions are going to come to your attention. I would make a comment though; when you look at this problem not from the viewpoint of your overall classroom, but from the overall problems of the people who are in the HEAD START project, then you are dealing with an altogether different situation. You are not looking at 10 kids or 20 kids but looking at what is estimated to be 17 million children in the United States who live in families where there is an income of less than $250.00 per month.

That sounds very fancy--I tried to calculate it up and I looked up some of the data that they had in the magazine CHILDREN that is put out by the Department of Health, Education and Welfare to try to find out what that really means. Well, real eligibility in a HEAD START program is calculated on the basis that in a family of four the child will have seventy cents available for food each day--that is, again, 25¢ for a quart of milk and 45¢ for the rest of the food for the day. Of course they are very smart and they know exactly what to do--they can get all the nutrition they want if they are kind-hearted and not given to reading nutrition books; then they might buy the kid a bottle of pop and some ice cream and some of the other things that we tend to give our kids and still have room for meat left over. There was a very interesting article that I'll just take a moment with that was done on the other coast (that didn't specifically deal with children) that the Health Commissioner wrote about recently in one of the public health journals. He tried to look at poverty as though it were a disease; he tried to figure out how much death, just death, the harshest criteria of all, was due to poverty in his city. He tallied it all up and tried to figure out the excess deaths from any cause in the poorer sections of the city versus the richest sections of the city and he found that poverty was the third cause of death in the city of New York. First came heart disease and then came cancer and then came poverty, and there was no other way to figure it because if you didn't do a thing about heart disease and you didn't do a thing about cancer and just brought the level of income up of the people in his city, 13,000 people a year would have been saved. So it's a serious problem from the viewpoint of all the people. In a classroom you might not see so much that will make it seem as important to you but the potential is there, I think, using Dr. James's statistics as a guidepost, to really do a lot for the children.

I'd like to emphasize one thing that is my own personal impression, and this is to try to get you people who are working in the HEAD START project not to pat yourselves on the back and say, "Gee, aren't we doing a terrific job, because instead of working with the school-age children, now we've got to work with these children in the ages when they are 3, 4 and 5." Forget about the fact that many of these children didn't have decent medical care and medical treatment while they were born or during the period when they were being carried by their mother. I would like to make the point that when you are looking at these children from the pediatric point of view you should try as best as you can to think that maybe during pregnancy and during the birth process they didn't have the kind of care that you would like to have for yourself or your wife, or your own children. It makes a great deal of difference to children--it's a crucial period of time. HEAD START is even now at best a stopgap from a health point of view. The poor people have more prematurity; the prematurity is serious; it can leave nervous system damage; it can create difficulties in the language; it can create difficulties in behavior--not always, not each time, but by and large it can cause problems of this kind. Of the women who have their children in the HEAD START projects, I think it's clear that when they carried their children they had many more complications during pregnancy than average: more bleeding, more hard blood pressure, all this in addition to the fact that the medical care that they got is not the best medical care in the world, generally. I think that one of the things that this leads to (again focusing the attention on you and what you can pick up, notice, etc.) is the fact that there may be more signs of brain damage and abnormal behavior that are not due to their environments or their backgrounds. Surely environment is a component--that's always a component--but there may be things that are residues of poor care that they had before that are subtle and difficult to pick up. The kid with temper tantrums, the kid who seems a little awkward--he may be someone who has a real medical problem, a problem related to the fact that he is poor and a problem related to the fact that his mother didn't get the best of medical care. I think that things like inattention, lack of intellectual performance, and increased activity are things that you will see in excess in children who have not had such access to medical care as richer classes in the population have had. I don't think that I can give you an exact estimate, but this is a component of the sort of cultural retardation or deprivation that the HEAD START programs aim to improve, and this is something that often can be helped if the teacher will notice this and will bring this to the attention of the physician.

Well, the problem that has come up and that everybody has touched on again and again in this discussion is perhaps best brought out by the questions that were asked of Dr. Freedman in the beginning: what do you do with problems when you discover them? Let me mention to you some of the results that Dr. [illegible] alluded to from a study we did in California last summer. We made an effort in the State Health Department to see what the problems were in the State of California among the children who were in the HEAD START projects, and also we made an effort to find out what results there were in obtaining care for the children. Last summer had a hurried beginning in a HEAD START project that was new, and we had less money for a follow-up than now. We found that dental disease which people had mentioned was the single most common problem among the children. Often the dental disease was very severe--like the cavity you just saw. You saw a mouth that had serious dental disease and missing teeth and some of you when you saw it might have thought, "My God, it might take a dentist one day of practice to help one child." But besides the dental disease, which was the one thing that most people notice when examinations are given carefully by a physician (and I was one of the physicians who participated in the study) there were conditions in half the children that had the doctor looking at it saying, "This child ought to see a physician and be treated for the condition." It wasn't necessarily what one could call serious; it might have been a child who needed his tonsils out; it might have been a child who had an abnormality when he would walk, it might have been flat feet; it might have been any kind of little thing as well as something that was more important. But of all the conditions that the children had, half of the children had a condition that a doctor ought to have seen. Of this half of the children, one-third of these conditions were felt by the doctor to be major in importance. To have something that we felt could be what a doctor would term a major problem is a bad situation. I bring to your attention the way that we try to categorize major problems last summer: by asking these doctors what seemed to be considered a major problem and didn't seem to be really so important. That is something that you ought to be aware of, you people working in the HEAD START projects, because these children often tend to get lost for treatment for lots of reasons: the treatment facilities aren't there; they don't treat the people well; the people don't want to go; or there isn't any transportation; or many other reasons. Some of these things, I think, you people should focus on. You should know and take it as your responsibility to see that if care isn't given, at least you know that the maximum that can be done has been done for the child to get care.

One of the major results in our study was that in every case, as far as we knew (we had an intimation that what we had wasn't always good), never was there a lack of medical resources in the community to care for the problem. They may not have been good; there might have been problems of money; there might have been all sorts of problems, but at least, theoretically, there was not one child in his own community who didn't have facilities available. These were farm worker communities, valley communities; included were children from Los Angeles and children from San Francisco, where there are big medical centers. But the fact is that most of these children did not get medical care and only 20% of them got even the start of follow-up and the start of medical services. There were five children who had a serious medical problem; we followed this up and months later only one of those five had even started on the road to getting treatment for what his problem was. So I think the responsibility largely comes to you.

We've set out some recommendations that we are going to have published in our own Health Department Bulletin and perhaps in another one or two places for pediatricians to read. A lot of these relate to how HEAD START administrators should set up a program. Well, HEAD START's about to begin and it is a little late to have those suggestions implemented now--maybe they ought to be implemented next year--but I'd like to quote a couple of these suggestions because I think they are important even if they relate to physicians and nurses. They are things that you should be aware of. Number 1 is: we felt that every effort should be made to have the screening examinations of the HEAD START children done by physicians and dentists who will have continuing responsibility for the care of children and where possible the care of the family. Now that may be a dream in many cases--but one of the things that we were thinking of was that the physicians coming into the HEAD START Centers would be there because they felt this was a problem that they wanted to help with, and they would be willing to assume some responsibility for getting to the kids. Not just you and not just the family, but the physician would. We wanted the physicians and the dentists at the HEAD START programs to recognize the problems that they will have in obtaining the follow-up services, and to work with the staff in the centers to focus the attention of the staff on the problems that really need care and have to get to a doctor. You are not going to be able to take care of everything.

Then we felt that every HEAD START center should have specific project personnel who assumed responsibility for seeing that the HEAD START children got to medical care--it's not going to be the teacher and there's not a nurse; it may most appropriately be a health aide or a volunteer in the project, but in any case someone who will really take this as his or her responsibility. Every HEAD START project, and this goes without exception, whether there is money for it or whether there is not, or whether you've thought about it or not, should have one person who is responsible for seeing that the children who need medical care get it--and they should continue in that role of responsibility after the program has ended. When you are a physician, you can't walk away from a case just because you want to go away on vacation or something, you just can't do it--you've always got to see that there is some continuity of care. Well, I don't care if the money runs out in October--if little Johnny has rheumatic fever and he's not on prophylaxis with penicillin so he can avoid severe heart disease, someone has got to try to make sure that he gets the right kind of care.

You should try to do everything in the health program that you can at the very beginning of the summer because you have a tremendous advantage--it's an advantage that even the physicians don't have--you will be dealing on a day-to-day basis with the children and with their families, and that makes an awful lot of difference from the point of view of motivation and the opportunity to impart knowledge. I think it is an unexcelled opportunity.

It goes without saying that it is not right to look upon the people as not motivated or stupid or feel that they don't care--in this sort of program you have to assume that if you give the responsibility and the know-how to the parents of these children, they will certainly take advantage of it. I think that it is very important in any of the projects to have parents present at the examination so the doctor can talk with them. A written form won't do nearly as good a job. It will make it personal to have somebody there, and I think the ideal thing in the HEAD START program would be to have each child's evaluation be as close to the personal medical care that a physician would give in his own office as you can possibly arrange that to be. I think that you, as teachers and project personnel, have to focus attention on the parents, because the children will never get to medical services and health education activities by themselves; you're going to have to involve the parents with the children.

I think that those were the main things that we felt should be done this summer that were not uniformly done last summer. They're not always easy to do and it's easy for me to stand up here and make these suggestions--but I would come back to the point that I made in the beginning. Even if I can't tell you how to do it, this is your goal, and HEAD START is a unique opportunity because preschool children have lots of problems. They have lots of problems in the health area and they need catching up on the type of care that, as I tried to point out, they have needed since infancy or since the period of gestation; it doesn't do to wait until they begin school. We are just going to have to do the best that we can do now. There are a lot more resources available this summer than there were last summer and a lot more know-how, I think, in these projects. I think that we ought to do a much better job than giving just 20% of the children a beginning in care.

HEALTH NEEDS OF THE DISADVANTAGED CHILD

William Burton, D.D.S.
Special Consultant, Division of Patient Care Facilities & Services
State Department of Public Health, Berkeley

It has been mentioned several times here this afternoon that the problems these children have in their mouths are the most common, perhaps the most expensive, and then also the most serious and socially compromising conditions that might face the child at this age. These are some pretty heavy thoughts that a lot of us don't take time to consider. As a dentist, of course, these things are among the foremost considerations when I think of these young people. It's not my hope to make dental health educators or dentists or specialists in dental or oral health out of a group such as this, but only to help if I can in some small way to increase knowledge and understanding, and then perhaps suggest some things that can be tangibly accomplished in improving the health of these children, both this year and in their further development. I understand that there is quite a varied background among the participants in this group. I wonder if there are any among you who are dental hygienists or dental assistants or have had any extensive training in this area. I understand there are going to be some workshops or group meetings after the few words that I have to say this afternoon. If there are such people as I have mentioned in the audience, they might well distribute themselves among the people in the groups--it would help in discussing some of these problems.

The figure that Dr. Gilbert brought out a few minutes ago showed that dental diseases (today we look at them as diseases, not just as decay) were as common as all other health problems combined found in the group studied in the State last year. When we think of the fifty thousand or so children that will be in the program in California this year, each (at this age) having twenty teeth, we find that this represents something in excess of a million teeth! When we consider the six-year molars coming in at the end, this is quite an opportunity and at the same time quite a responsibility. Another thought to keep in mind is that 98% of the public is affected by dental diseases. Very few escape it. And as we consider these children in the age group of 4 to 6, I think it well to think for just a minute that the age of six is when we get our first permanent teeth, the first molars, which are in fact the cornerstones for the entire dental health pattern of that individual for the rest of his life. By the age of six more than one third of the children will have decay in some tooth, sometimes before it has fully erupted. Additionally, there are irregularities in the natural dentition caused either by heredity characteristics or by poor habits the child might have. And then more rarely, but still frequently enough so that I'm sure there will be several examples noted by you people this summer, there is a cleft palate in about one in 800 births. This represents some rather complicated challenges for people working with these children to help them in overcoming it.

A word or two about the importance of teeth, if we can, just by way of a summary and a matrix for thought. The most important function of the teeth is, of course, that of chewing our food, which in turn begins to set in motion our ability to nourish the rest of our body, and in fact then becomes a very influential factor in the contribution to the health of the whole child. Secondly, but perhaps equally important, is the fact that if there is a single tissue or organ that affects the appearance of an individual more than any other it is the teeth. This isn't so readily noted by the child but as the youngster gets older and he reaches young adulthood, this becomes quite apparent. And thirdly, there is the importance of the teeth in speech, where the teeth are crucial to being able to speak clearly and to communicate with people, either as children or as we get older. When we look at the dentition of the child at the age of four, five, or six, naturally these are the baby, first, or primary teeth, but these teeth are the patterns, the framework, the foundation of the permanent or second teeth. Therefore they provide both a pattern and a source from which this child will develop his more mature facial form. They will be succeeded by the permanent dentition and of course ultimately they have a very significant effect on the adult's success, health, and well-being.

Earlier it was mentioned that deplorable conditions can be found in the mouth; I don't know how many of you in the room here have seen what some mouths can be like. We often think of them in terms of our own experience, but if I could I would like to show just a couple of slides. (A series of slides shown at this time.)

The children are not coordinated at this age to do the job of cleaning their teeth effectively and reliably by themselves. They have to be helped; they have to be taught. There is no way that a youngster will learn from his parent other than by being taught. There is no hereditary knowledge of oral hygiene, so we have to teach generation after generation. If a little time is taken to teach them at this age, of course, then they know it the rest of their lives (with some reinforcement). And then they add to it as they go along. We can't teach them the finite details; we can't make sophisticated scientists of them at this age, nor should we try. It's promoted that we brush our teeth after every meal, sometimes three times a day. I often wonder if some of us don't do it so quickly that it takes us three times to get them clean once. If the child is taught to clean them once, well--(which only means three minutes or so), this is 365 more good cleanings a year than most children give them. I think that we've got a margin that we can work on. Hopefully we can get one step one year and add to it as we go along. We can't accomplish the impossible overnight. I don't think we can change their food habits; I don't think we can radically change their general hygiene habits; I think we can begin to add to them and then reinforce them as we have the opportunity.

There is one other thing I think that we might mention (I think this has been mentioned already in relation to the physician). Manpower is short. The conditions that you saw in the slides today have not come about in the last twenty-four hours. They can't be taken care of in the next twenty-four hours, but we can begin to make progress. It will take time, it will take patience on the part of both the youngsters and those working with them. It's going to require a great deal of patience and persistence on the part of you people to encourage both the parents of the children and providers of care to get together so that the child receives the benefit. There are many organizations and many groups that you can turn to for additional assistance. I can't think of a one that wouldn't gladly help if asked. Right here in San Francisco there are very active groups within the dental profession. Of course the physician's groups are constantly working with you people. The nurse groups would be willing to assist. The dental hygiene groups--in fact the dental assistant groups that we don't ordinarily consider as part of the personnel--that will go out and assist people like yourselves would be tickled to death to show you what they can and help wherever they could, if asked. The local health department, the State Health Department, the Division of Dental Health, the State Division of Patient Care Facilities and Services would help. So please, if there is anything that we can do, we'd like very much to assist. If you will let us know we will do our best, or at next best, refer you to someone perhaps more locally associated with your group to help you. Thank you.

HEAD START RELATIONSHIPS WITH SOCIAL SERVICE PROGRAMS

Dr. Mario D'Angeli, Professor of Social Welfare
San Francisco State College

It's a pleasure to be here. I am to talk about social welfare this morning. In starting out I think it is important to get some grasp of what social welfare is. It is not too easy to define. I think perhaps that we can determine more readily what social "illfare" is, and let me cite an example of this. Some time ago when talking with a student, he told me that his father was a tire regroover. I said, "Tire regroover, you mean tire retreader." "No, no, a tire regroover." "What is that?" "Well, it's when you have a used car and you want to sell it and you want to make the tires which are bald appear to have tread on them, somebody does the regrooving on these tires." Now, this fits well into my definition of social illfare. I think society can do without this function and I would certainly recommend some MDTA retraining for the development of a new role for this tire regroover. The definition of social welfare is a bit more difficult. I think that we can say essentially that it is the system of services to people which are not in the market economy. This is essentially what I think social welfare is. We can purchase goods and services if we can pay for them, and this is the market economy. Some of us have need for services which we cannot purchase directly as individuals. Services which we actually do not pay for as individuals I would consider to be social welfare. In defining welfare, some people include education; some people exclude education. I think we can get perhaps a more clear idea by taking a look at the structure of social welfare services in the United States. I think we can see the structure if we view the different levels of our society. Let us see the national level, Washington; the state level, Sacramento; and the local level, San Francisco.

Now at the national level in the United States we have the federal Department of Health, Education and Welfare, known as HEW. HEW includes, as you know, the Office of Education; it includes the Social Security Administration; it includes the Bureau of Public Assistance. It is a very large department of government with many different sections and bureaus. Now at the state level we have the State Department of Social Welfare of the California State government. The State Department of Social Welfare is not administered by HEW at the national level but there are some close relations based on the offering of funds. Most of these funds are on a matching basis by the federal government through the Department of Health, Education and Welfare so that we can see a financial relationship between HEW and the State Department of Social Welfare which influences program and policy at the state level. With the advent of federal funds have come certain policy stipulations that are written into the laws authorizing the allocation of these funds. The result is the establishment of the minimum standards of welfare in the fifty states of the Union.

Then we have local or country levels. We have locally the San Francisco Department of Social Services. San Francisco Department of Social Services was known recently as the Department of Public Welfare. In most counties in the country it is still known as the Department of Public Welfare. But we have changed the name here, and the reason for the change is that there is a new outlook. The new outlook is that of giving of service...a greater consideration of the needs of clients of the Welfare Department. The Department of Social Services is also related to the State Department of Social Welfare in that the state is the broker for the federal welfare funds which come from Washington. The local departments of the public welfare of all of the counties in California must abide by the minimum standards that have been established by the Department of Social Welfare in Sacramento. Sacramento does not administer public welfare in California but the state has a voice in determining local welfare policy. How strong this voice is depends on the political administration in Sacramento.

Let us consider the programs of the local Department of Social Services. One of these is called the Child Welfare Program. The Child Welfare Program is in part financed by federal funds, matched by state funds, and matched in part by county funds, and it contains three main sections. One is Adoption Services. Another is the Foster Care Services--you know the distinction. The child who is to take the name of a family to which the child goes and to be legally adopted--that is one process, one result. And the other, Foster Care, is considered to be a temporary process in which a child who cannot live temporarily in his own home goes into another home and on a temporary basis gets substitute parental care. The third part of Child Welfare is the Protective Services. Protective Services has a close connection to the courts. When it is known that a child is receiving parental care which is considered to be bad for the child--if this comes to the attention of the Protective Services unit of the Department of Social Services--they can look into the matter and if they find that their study supports this contention then they can try remedial case work or go to the local court and ask that the child be at least temporarily removed from his home. That is essentially Protective Services.

Then there are the public assistance programs. These public assistance programs include AFDC, Aid to Families With Dependent Children. These are financial programs. These are programs in which people can receive funds if they meet the definition that is set for being in need. They can receive funds; they can also receive a social service, e.g., they can also receive counseling service. Then there is the Old Age Assistance, OAA. This is obvious, this is financial aid to (or counseling aid to) people over 65. There is Aid to the Blind, which is another separate program within public assistance; and then there is Aid to the Disabled. These are the main categories of public assistance, and these all stem financially from legislation passed at the national level so that the National Bureau of Public Assistance of HEW is given funds by the Congress to be then given on a matching basis to the States which in turn can transfer this money to the county level.

Then there is another program which is entirely local called General Assistance. General Assistance is not financed in any way at the federal level or at the state level. This is a program that is completely financed at the local level or the county level. And we find that without exception that the General Assistance, or sometimes it is known as "indigent aid", offers funds; offers grants of money to needy people on a less adequate basis. In other words, two people may have an equal amount of need for funds, but if they do not meet the eligibility requirements of the programs that are financed at the national level and state level, they must resort to aid in this final category.

Then, of course, as a part of HEW there is the Office of Education, and there are the various compensatory education programs which have been developed and are developing there. And these too reach into the school systems at the county level and are functioning at the county level and are based on federal funds. Then we also have on the part of HEW in Washington the Social Security Administration--and that goes from the national level down to the regional level with perhaps local offices--and what they do is operate from the federal to the regional, and then they may have local offices operating out of the regional offices. This is a social insurance system; this is a system of social service which is based on direct contributions by yourselves, by ourselves, and by those who employ us. It helps to protect us against the major risks which we encounter going through life. Now whereas the public assistance programs are not social insurance, they are on the other hand based on the need that people have. Now we understand that people have contributed to the national support of these programs through our tax monies, through the payment of income tax, federal excise tax, etc.--we have contributed indirectly, but the offering of these funds, the receipt of these funds, is based on being able to show certain needs, whereas the Social Security Administration funds are a social insurance plan and it is based on a right, based on the fact of our direct contributions.

Then we have other programs which have federal and local financial connections. For example, the Federal Department of Labor has developed certain programs for the protection of the worker, the programs for the retraining of workers, such programs as the MDTA which go from the federal to the local level.

Then we have some programs which originate at the state level; for example, the State Department of Mental Hygiene. The State Department of Mental Hygiene has a financial connection with mental hygiene clinics and mental hygiene facilities at the local level. The Community Mental Health Services Act, passed in the late 1950's, has enabled State government to offer money to local government on a 50-50 matching basis if the local government will set up a mental hygiene clinic or add to a local county hospital mental health facilities or mental health wards, and if these can be financed in part by the State government.

Also through the State Department of Mental Hygiene there is the Bureau of Social Work. The Bureau of Social Work is the section of the State Department of Mental Hygiene which works with persons who have been patients in mental hospitals. After they are released and they may have contact, counseling contact, with social workers who work for the Bureau of Social Work for a period of time. Some of you may have read recently that there is a movement afoot for the transferring of the Bureau of Social Work to the State Department of Social Welfare and this present session of the State Legislature may bring that about--we will see in another couple of weeks.

Then we have some other agencies which operate at the State level and without federal support. We have the State Adult Authority. The Adult Authority is in charge of all the State penal facilities, correctional facilities for adults in California and for adult parole; for people who have been in these facilities and who have been released ahead of the time of completion of their sentence and have contact with State parole officers. And the State Adult Authority has local offices around the State. So you see one welfare institution of the Adult Authority might be San Quentin. Some of you may look askance at this but it's really how you look at it, and it is also one of the main points here, and it is what is happening. For example, San Quentin may not have started out as a Social Welfare institution offering beneficial services to individuals but there are some indications that to some extent it is moving in that direction and other facilities are moving in that direction.

Then we have in California the California Yough Authority. The California Youth Authority also has various institutions and facilities for persons under the age of twenty-one who have committed acts which are not only considered deviant but also illegal by the community--such places as Perkins. And the California Youth Authority has also youth parole officers for young people who have been in the youth authority installations and have been released and remain on parole.

We also have a federal prison system and a federal probation system in which we see a relationship between the federal level and at the local level; we have local parole officers who work for the federal prison system. And then we also have, at the local level only, juvenile probation and adult probation. This is a service provided to people who have been convicted and sentenced for something, have been found to have been deviant and illegal. They go on probation instead of going to one of the institutions or one of the facilities. Well then, all of these are considered more or less a part of public social services in the United States, and we see their connections at federal, state and local levels. Now added to these services we have recently had since 1964 some new programs, and the one with which we are most directly involved here is the OEO.

The OEO came into existence in 1964 and a part of the Office of Economic Opportunity is the CAP, the Community Action Program--probably the single most important program in the OEO. The OEO has regional offices throughout the United States which serves all of the Western states, and I believe also Hawaii and Alaska. Then the local communities are enabled to have, encouraged through this federal legislation local CAP councils, really local anti-poverty councils as they are called popularly. Through these local councils can be initiated such programs as the one in which you are involved, the HEAD START program, among a number of other programs. But these local programs, although they are initiated at the local level and must have the approval of a local council, must also go through the process of being approved by the regional office at the federal level. Then in addition to all these public services which we have and which have grown considerably in recent years, we have grown considerably in recent years, we have private social welfare services. These are non-tax supported, voluntary organizations. Examples of organizations on the national level that are associated with local private social welfare services are the health and cause organizations such as the Cancer Society, the Heart Society, the National Tuberculosis Association, etc. But direct service private social welfare is administered at the local level. We have in California the California Association for Health and Welfare, but this is not an organization that has administrative direction over the local level. This organization holds an annual conference which brings people together to communicate regarding social welfare, trends and problems, etc. In large urban areas local private welfare is being reorganized on a regional basis. There has recently been established a Bay Area United Crusade, and then a correlary organization, a Bay Area Council. Now these are private organizations in that they are not tax-supported. They are based essentially on our contributions in the annual United Crusade Drive. The United Crusade at the Bay Area level is the fund-raising organization for the Bay Area Council. The Bay Area Council does not have administrative direction over the private social agencies which exist in the city of San Francisco, and in the city of San Mateo, and in the city of Oakland, and the other cities of the Bay Area, but they do have considerable influence over these agencies because they control the financing of these agencies. What we have is the Bay Area Council and then each of the five counties, there is a county private welfare structure. The San Francisco Welfare Council has several sub-councils: The Group Work and Recreation Council; the Family and Children's Council; the Health Agency Council, etc. And each of these Councils then includes within it the different agencies of the community. For example, the Group Work and Recreation Council includes the Jewish Community Centers, the Catholic Youth Organizations, the Mission Community Centers, and now the new Golden Gate Community Centers. The Family and Children's Council includes the Jewish Family Service, the Catholic Family Service, the Family Service Association, and other agencies of that sort. And the Health Council includes the local chapters of the Heart, T.B., and Cancer Societies and others. This is a skeletal outline of the structure of social services, nation-wide at the state level, the regional level and at the local level. Let us now consider for a moment the functions of Social Welfare.

As I see it, the functions of Social Welfare are three-fold. They are social control; service to the institutions of the community; and finally service to the individuals to the community. Now what do we mean by the social control function of the social welfare structure? It is essentially this: After we have been socialized, let us say, in our families what is it that helps us to control our behavior; to act generally as we are expected to; to live in accordance with what are the expectations of the people around us? It is rewarding experience with groups and organizations of the community. This is essentially what social control is. This is one of the functions of the social welfare system, private and public. An example of the social control function follows: An article from the Sunday Examiner and Chronicle of June 19th on the alarming growth of delinquency. What is alarming at the National level is that juvenile delinquency cases rose three and one-half times faster in 1964 than the 4% increase during that year in the child population between the ages of ten and seventeen. Now let's hear what is stated next. The prediction that 'one out of every nine children will be referred to a juvenile court for delinquency points out how urgent it is to speed up our efforts to meet the needs of our growing child population.' What this writer is saying is that we must provide more and better services in order to prevent juvenile delinquency. This is an example, I think, of the social control basis for social welfare. I think that another one is in a newspaper article written by Bud Schulberg in the Chronicle of May 19th on the "[illegible]," the Watts situation. It describes people who have not received satisfactions in their lives; people who are feeling frustrated, whose needs are not being met. The tensions develop and then they act them out in ways considered deviant in the eyes of the community. The provision of social service to prevent this sort of thing is an example of the social control function. Another example of this is the case of a welfare department in one of the Bay Area counties which performed night raids on the homes of women who were on the AFDC program. Women who were caring for children and who had need for AFDC funds were subject to invasion of privacy and control over their private lives as a basis for continuing on welfare. Recently I saw an article in the Chronicle by Sylvia Porter who wrote about the millions of the near-poor. She said: "Thirty-four million people are living under the poverty line and sixteen million Americans are living right above it. These facts are a testimonial to the power of our boom to pull up the impoverished. But they also are a warning of what even a slight economic recession could mean to fully fifty million Americans." What she is saying is that in recent months there have been people who have been below the poverty line and who have gone above, but just slightly above it. And what she says is that the slight recession could send many of these people below the poverty line. She goes on: "The line between the two categories is actually astonishingly thin. By social security's definition based on U.S. Agriculture Department food budgets, a near poor family of four lives on an income totaling only [illegible] more per day than the poor family's income of [illegible] per day more per person. The near poor family's monthly income is $78.00. The poor family's is $60.00 or less. The fact is that one in every four Americans, including twenty-two million children under eighteen, now exist at these levels. The fact is that today 30% of all Americans over the age of 65 are either poor or near poor. The fact is that the loss to the nation represented by this poverty is astronomical. If all the poor could earn just enough to cross the poverty line of $60.00 per week their total income would rise thirteen billion dollars a year. If all the near poor could earn just enough to cross the near poverty line at $78.00 per week their total income would rise 8.2 billion." Miss Porter further states: "It doesn't take any mathematical genius to translate these figures into multi-billion dollar totals of lost production, lost tax payments, lost spending power." This is an argument for helping the community through a stable economy at a high level. This argument that is also used to support social welfare services for the provision of substitute or supplementary incomes for people who cannot earn their living or cannot earn enough of a living. We are told we should support welfare so as to help the community. It is a valid argument that the community and the institutions of the community can be aided in this way. Miss Porter then makes a different argument. She says: "The statistical poverty line is actually no more than a figure of speech. Millions who have escaped over the official line [illegible] appreciably over it. It has taken more than 5 years of effort to reduce the poor by six million to only thirty-four million and to raise the near poor by one million to only sixteen million. It would take a painfully short period of downturn to wash away these gains. [illegible] it can be forgotten [illegible] a nation that many tens of millions of lives are at stake in our fight to achieve a sustainable prosperity and thereby to avert the danger of an economic decline." This now speaks to the third basis for social services. That is the effect on individuals. In my view, we should be aware of these first two bases for social welfare, social control, and benefit to the community. We should be supportive of these two bases for social welfare, but I think that those of us who are directly involved in the HEAD START program and in other such programs where we are working directly with people should concentrate on this third basis for social welfare. The effect on the lives of individual people. What do we need to know, in brief, to help the community to implement this third basis for social welfare?

I think we need to know something about the historical origins of social welfare. In our modern economy, our modern market economy, social welfare developed within a philosophy of bargaining. There are three bases for the relations between people, as I see it. One is affection and love and we see this expressed for the most part at the small group level; the intimate friendship, the family love. I'd like very much to see it expressed at the broader and higher levels where there are many many more people but this is difficult to do. I do not say it is impossible to do, I think it is possible to do, but it is difficult to do. But this is one basis for the relations between people. The second basis is the bargaining basis and this, I think, has been the context out of which social welfare in our society has developed.

The bargaining basis is essentially this: What can you do for me? I'll do something for you if you can do something for me. Now if you can't do anything for me then I won't consider doing anything very much for you. This places dependent children who can't do very much for others at a loss; it can place at a loss people who have not had the opportunity for educational, social, and cultural attainments that may be necessary to do enough for others. This has been the prevailing philosophy. The prevailing basis for relations between people in our society. The third basis is that of duty or of obligation.

It's this third basis that is an important one to consider and to attempt to implement at the national, state and regional and local levels. I think that this is one that implements the affection basis that we find at the small-group level. In other words, if we can make clear--if we can place into statute and if it can become a part of the norms of the larger society--that it is a right for people to have the opportunities to attain that which is necessary to live satisfactorily in the community, that it is a right for people to receive help and service when it is not possible for them to buy it on the market economy, if this becomes established as a duty of the community, as an obligation on the part of the community, then, I think, that this is a very important basis for promoting affection on the large scale in modern society. Reviewing the history of the development of social welfare, not only in this society, but the evolving towards welfare throughout the world, I think that there is a universal philosophical basis for social welfare, and I think that it has been expressed in every religion that is known. I think for example that the concept do unto others what you would have them do unto you, is a statement of this concept, a statement of mutual concern and cooperation. I think that this is embodied in almost every religion known. For example in Brahmanism we find: "This is the sum of duty: do not unto others which would cause you pain if done to you." From the Mahabharata, 5:1517. From Buddhism: "Hurt not others in ways that you yourself would find hurtful," from the Udand-Varga, 5,18. In Christianity: "All things whatsoever that ye would that man should do to you do ye even so to them for this is the law of the prophets," Matthew, 7,12. In Confucianism: "There is one maxim which ought to be acted upon throughout one's whole life, surely it is the maxim of loving kindness, do not unto others what you would not have them to unto you." This is from the Analerts, 15,23. In Islam: "No one is a believer until he desires for his brother that which he desires for himself," from the Sunnah. In Judaism: "What is hateful to you do not to your fellow man. That is the common law, all the rest is commentary," from the Talmud, Shabbat 31d. In Taoism, "Regard your neighbor's gain as your own gain and your neighbor's loss as your own loss." This is from the Tai Shang Kan Ying Pien. I think that it is important to bear in mind that we do have philosophical and religious support but that we, however, do have conflict with the philosophy of bargaining and that we must do something to resolve the conflict.

Looking at the present social welfare organization we have seen that there are public and private sectors of it and that in both sectors there are attempts at the provision of more adequate services to people, services that are what the people need now, and not what was needed thirty years ago. The community welfare councils are an example of a social structure that attempts to do this at the local level. However, I think, that we have found that in spite of the setting up of structures of this sort there still remain gaps in service; we find that people who have need cannot find an agency that can meet that particular need. And there they are, in between agencies, with nothing in that community to help them. We have gone beyond that day when the family could do it for them. The family in many of these cases today, cannot do it; therefore, if we really believe in the "do unto others;" if we really believe that this is a part of the way of life that we should have; then we should make more effective our community organization; the attempt to, in other words, integrate the community at a higher level. By integrating the community is meant the opportunity for the receipt of satisfactions by all individuals in that community. I think that many of you realize this is not an ideal situation today. There are lags in meeting need. We find that one part of the community changes; for example, a new industry comes in or an old industry goes out, or automation wipes out jobs, and we find that the changes that are necessary in the structure of social services do not take place. The involvement of many more of us in social planning is necessary to cut the lag.

There is also the matter of institutionalization and bureaucratization. Now by institutionalization is meant, simply, that a structure, a program, is established and that program is considered good and desirable and therefore receives support for its continuance, and once it continues over a period of time we call it an institution. We say that it is institutionalized. This process brings benefits to the community, making more permanent certain structures that are necessary, but there are also some negatives in that the institutions have a tendency to become fixed and hardened and crystallized at a certain point at a certain level and don't keep up with the times. Then there is this matter of bureaucratization of services. All social services are essentially bureaucratized and for many people this is a bad word. But a bureaucracy means essentially the organization of an enterprise, delineating clearly who has responsibility for that enterprise, what is the line of responsibility, and what are the official lines of communication. This is something that is necessary. A bad bureaucracy is one that gets so snafued in red tape that it doesn't meet the needs of its client or of the community; this is not what we want. Unfortunately as you may realize, one of the propensities of bureaucratization is that it becomes ingrown and self-centered; the focus too frequently then becomes the operation rather than the result of the operation. In other words, rather than the delivery, rather than asking what are we doing for people, what sort of service are we giving, the bureaucracy begins to focus and then concentrates on its internals and they forget the client. I think another aspect to consider about social welfare both public and private, the different programs and their problems of integration within themselves. Each program has a problem becoming a more effective unit in which the people are working together better in order to deliver the services. Then there is the relationship of each of these programs with its environment. This is what we call adaptation. Every social organization and this includes every social welfare organization has this problem of integrating itself and of adapting itself. And these problems are continuing problems, these questions need to be continually on the agenda of these organizations. In other words how are we doing among ourselves and how are we relating to our environment? I think it is important to bear in mind as you have contacts with some of these agencies or organizations of social welfare that they have these problems and they are in a state of flux in how they respond to these questions of integration and of adaptation. Now these programs that we mentioned may have become rather institutionalized; they may have become highly bureaucratized but they are still, although they don't seem to be, in a state of flux. There is still some change taking place. In some places it may be all too slow, in others not, but there is still change taking place--there is still potential for change because these institutions or these agencies are made up of human beings who are relating to each other every day, and if you knew some of these programs from the inside you would know that sometimes they have their internal conflicts. I would counsel that in view of this--you use this--don't look at an agency as something that is there and that is the way it is going to be for ever and ever because it just "ain't true." And if you realize this you could help--other people could help these agencies to make some changes which may be desirable or necessary in order to more fully implement this third basis for the existence of a social welfare structure.

Now I think, that looking at the welfare structure as a whole, we are entering a situation of considerable promise, considerable potential. I think that if many of us can realize this and if we use our good brains and if we communicate with each other I think that we can influence this whole welfare structure. It may sound very imposing--and it is--and it involves vast resources-- and it seems like something very very foreign to many of us, but I think that if once we have some understanding of the situation, ways of acting come to mind and it is no longer that difficult. Our immediate goal within this potential is influencing the welfare structure to become more rational--to focus more on this third basis for its existence. One way we can help do that is by becoming more aware of specific problems that specific people have and helping these people with these problems to come into contact with the social agencies-- and in a second I will refer to this. But I think that another problem that we have today and one which we need to take some responsibility for is this: We were talking about the social welfare structure within the United States--

are we talking about means and measures for the better integration of our national society--in other words the provision of opportunity for the satisfaction of needs and solutions to problems regardless of whether we can have these needs met or problems solved on the market economy or not? But then I think that we have a problem in the adaptation of American society to the rest of the world. And I think these two problems of integration and that of adaptation are intertwined and if we don't realize this I think that we should give it some thought. A recent editorial in the San Francisco Chronicle helps to focus on this. The editorial is entitled: The Great Society Can Afford It.

> Dr. Neil Sullivan, the Berkeley Superintendent is bitterly critical of the Johnson Administration for signaling a cutback on the Great Society's commitment for Compensatory Education. Compensatory Education is a special effort booster-shot kind of program designed for academically behind-hand children from the low-income neighborhoods. Sullivan observed that it is obvious that the Johnson Administration has made a decision. We are changing our commitments we made in Vietnaam and we are changing the commitments that we made to the children of the Nation. He said that he'd been advised that next year's Presidential budget will yield only about 85% of what was authorized for the current school year's Compensatory Education program. This cut-back will cost Berkeley schools $75,000.00 and San Francisco's $525,000.00. Sullivan recalls that last Summer when the White House Conference on Education was reaping attention the President personally encouraged educators to hope for an increase in funds for Compensatory Education. It has lately become obvious that President Johnson is drawing in his horns on Great Society programs while he scratches for more for Vietnaam. And while we have no quarrel with his warning last Friday against trying to go too far too fast on these programs or with his advice that maintaining equilibrium is important, still a 15% reduction on funds for the grade-school training of the least advanced urban youngsters is not maintaining equilibrium; itis not going too far too fast; it is going backward and that is tragic.[4]

Now this is something here that I think is important--that we pay greater attention to and have greater concern about our adaptation as a Nation to the world society at the present time, and that we try to make sure that our leaders who have direct responsibility for this do not misdiagnose the situation where there are some people who are very hungry and very needful and who feel a need to change things. Let us hope that we do not misdiagnose and send police or send troops when we should be sending help--teachers, social workers, and financial-material help. I think that it's very important that we pay greater attention to this because this is one of a number of examples which can be cited where our international adaptation and what we do outside of our borders affects directly our internal integration. Now I wish to show how our particular roles here in the HEAD START program fit into the foregoing.

A first role is that of undertaking referrals to social welfare programs--referring people with problems to them. This referral process is essentially a common-sense process. What it involves is finding out as much as you can find out--what are the facts of the person with the problem--and then finding out what specific programs there are available in that community and bringing these together. In the referral process as it has been historically conceived what you do is inform the person and you counsel with the person about this particular service or this particular agency and you then let the person know where this place is and the person goes himself. Now I think that it is necessary to modify this classic referral approach when we are working with people who have been alienated from these agencies or these organizations or have had bad experiences with them. I think that it is necessary to consider being more active in referring them--phoning in some cases for them, of going along with them, and if this cannot be done by oneself, personally, of developing local mechanisms, local aides, support groups who can help to do this. I think that another role that we have vis a vis the social welfare structure is that of being a social broker; and if we cannot do this ourselves, of being a part of the process of developing the local mechanisms which can be developed in HEAD START programs and in local districts and neighborhoods, etc. And by social broker I mean the interpretation to a number of people who need a particular kind of help, a particular kind of service: helping this group of people to make contacts, bringing them in touch with this service and then helping them if they find that they are not receiving adequate help from this service to go on and communicate this, translating this to other people. In other words, rather than the referral of one individual, which is the first approach that I mentioned, this is dealing with groups of people and informing them, and helping them to make contact. Now if we perform, or if you help to bring into existence this referral process or this social broker process, I think that one of the things that we are going to find if we are quite effective with this is that the social welfare programs are going to be getting plenty of business--not that they need it--but they are going to be getting it. And I think that what we are going to find is that there are going to be some programs which are not going to be able to keep up with the problems presented and therefore this calls for a third approach and this is one that you can directly do or you can influence the development of it--and that is the community development approach. As you perform the referral function and as you perform the social broker function you may find that there are not enough services available of a certain sort. You or the people working with you have truly searched and have really worked at this but you find that there aren't enough resources available. In this case you help the people who are in your district, the parents of your students to act themselves in an organized and rational way which influences the inception of needed programs. This refers to what I mentioned earlier regarding the welfare councils which inquire into what the needs are and attempt to influence change in agency programs. Too much of this process has been undertaken without the direct involvement of many of the people who need these services and these are the people with whom you have the opportunity to work and whom you can influence directly or indirectly to become a part of this process. I can see no result other than a beneficial one if this community development approach is initiated and effectuated.

I'd like to say in conclusion that now as you have contact with social welfare programs--some of you directly through referral social brokerage, and community development--some of you indirectly through people who are working with you--that you try to keep your focus on the facts of this specific situation--and not on emotional views which are not based on facts. Try to know what the facts are. If you can answer the questions who, what, when, where, how. If you can answer these questions briefly and if you have the documentation--then these can be presented in the way that is best received by people who are in the social agencies and who receive the phone calls and who receive the letters, asking for some help and attention. And there is another factor here and that is to bear in mind that there are certain hang-ups, certain perceptions that people have about their own status--and importance. I think that some of you may have the tendency to feel that though you just know more and you are at a higher status than people who are in these agencies. There will be others among you who will have a tendency to feel, "Oh, we don't know anything, we don't really know enough." And you feel that you can't communicate with the people in these agencies. I hope that you can think this through and work this through for yourselves. I think it is important for you to do--to realize that you have a job to do--you have an important job to do. Be clear about what the broad purposes are of the job that you have to do. See it in its entirety and see your part in it (and every part is an important part). There are going to be goals and purposes that will not be achieved unless every part of the organization is functioning and realizes its interdependency and therefore its importance. If you bear this kind of an attitude then you will not be bothered by feelings of somebody having higher status or somebody having lower status. You have a job to do--it's an important job--get the facts--do the job.

One final thing is: if you want some specific information about where to find help in San Francisco for a person with a problem, call 835-2440, which is the community fund information. The person who answers that number knows every agency in the community. You call that number and you discuss the problem and you ask that person what agency--and that is the beginning and only the beginning, of course. The real job is done when you really get to know your way around the community and you really get to know the people in the community; then you are really doing the job. You can go to a much wider ranger of people and you can find out from them where there are openings and what can be available, etc. But please, in conclusion let me say, don't depend on this. Don't stay only on this approach--that is, on referral. I would hope that directly or indirectly you will support and get involved in the approach of social brokerage and community development.

FOOD FOR LITTLE PEOPLE--NUTRITION IN HEAD START

Dr. Gertrude Luehning, Chairman-Home Economics Department
San Francisco State College

The significance of Project HEAD START, as I see it, is to get really operational equality; to gain full stature for all; to develop attitudes, habits, and concepts of self-esteem, built in at an early age; to assure a nation of sound, able contributors and participants in our democracy.

Nutrition is a fetish concern of the American people; dieting the most universal conversation piece outside of the weather. An aggregate of misinformation, pure myth, and profound ignorance, usually coupled with lack of willpower, characterizes most of the population's nutritional concepts. "Food Becomes You", "You Are What You Eat", are titles of sound popular nutrition books. Their titles are quite literally true in the physical sense--and also food has bearing on one's emotional, intellectual and social development and prowess. Through sound nutritional practices carried on in HEAD START, the home will be influenced too via the child telling of the project's food and by close cooperation between the home and the project or school.

The HEAD START NUTRITION booklet (1) is a high quality, concise and effective guide bearing enough of itself in vast amount of applied research knowledge.

Packets of materials - I will cite as I proceed. Show 'Nutrition Education Materials - Reference List. . .' California State Department of Public Health (2).

Project HEAD START emphasizes that it is necessary to "establish sound nutritional practices by providing food to program participants as well as educating families in the selection and preparation of food in the home."

Food intake makes a major contribution to the physical, intellectual, emotional and social growth of the young child; effective habits established in early childhood form the basis for habits which persist throughout the life span. The objectives, goals, or purposes of nutrition in Project HEAD START can be summed up as:

1. Feeding the hungry--the not-enough-to-eat because of lack of home financial resources, lack of knowledge and/or food preparation skills, lack of stability to provide regular meals on schedule, etc.

2. Getting needed nutritional elements for body structural development during these early childhood years.

3. Developing effective eating habits with regular-schedule food

intake- recognizing and responding to "my body is hungry; it is time to eat"- which carry into the child's home and can be the basis for lifetime habits.

4. Developing ability, capacity and willingness to try new foods- new flavors, textures, colors, shapes, sizes. Daring to explore with food.

5. Developing effective social habits of eating. Increasing dexterity in eating finger foods and gaining confidence in use of eating tools.

6. Developing awareness ofanl abilities in the social experience of eating with others - sharing food, ideas, feelings; gaining in ability to help create a relaxed, enjoyable situation.

7. Including parents or surrogates of the children by having them assist in the food service program on a regular basis, perhaps on rotating schedule; by meetings which offer help and information they want, such as a demonstrator film showing vegetable handling from store to serving; by cooking demonstrations; by materials to give them, sending the week's menus home to help parents not to duplicate foods served that day at school.

8. Encouraging the concept of a place for eating - any defined place, cleared and clean, wiped and set up for the activity of eating - a simple, quick, practical setting but a distinct setting. Eating in the classroom vs. a lunch room setting: if the former has to be, clear and set up while children are out of the area.

9. Respecting food likes and dislikes, family and cultural food patterns while seeking to increase acceptance of a well-rounded diet which includes an increasing variety of foods and flavors and each day includes foods from all of the basic 4 food groups.

10. Gaining respect for the proposition that food is important in daily living and that food choices must be based on knowledge, with habits checking back on knowledge because habits may shift and even be elusive.

Project HEAD START is concerned with upgrading the all-round opportunities of underprivileged little people. It is, however, nothing short of shocking that in this country, probably the most advantaged nation in the world's history, there is clear research evidence that adequate nutrition, much less good nutrition, is found lacking in children in all income brackets. An intensive study done in Ohio of [illegible] children showed that [illegible], or almost one in five of the children of the highest income bracket, had inadequate diets. Nearly one in three children of the lowest income families ([illegible]) of the total group of [illegible] had inadequate diets and only [illegible] (less than one-fourth) had diets meeting [illegible] the National Research Council's recommended dietary allowances. ([illegible])

A classic large-population study was done in 1951 using nearly 60,000 school children from all income, social, and cultural levels, who were selected by sound sampling techniques in 38 states throughout the United States. Data gathered from reports on food consumed over a three-day test period by children from kindergarten through 12th grade showed alarming dietary deficiences.

1. Two out of three children's diets need improvement; two out of five children have poor diets.

2. Significant numbers of children are not eating sufficient foods from all the basic food groups:

   32% had no green or yellow vegetables.
   17% had no vegetables or fruits of any kind.
   17% had no citrus fruits.
   (66% then, had no foods from the vegetable-fruit group of the basic 4.)
   22% had no butter or margarine.
   10% had no milk.
   13% had no eggs.
   (Only 1% had no breads or cereals and meats.) (4)

Feeding the young child-the child from 2½ to 4-whatever his socio-economic and cultural background, affords different challenges and requires knowledge and understanding of his physical-emotional-social developmental needs. As stated by two authors, Breckenridge and Murphy, the Facts to Remember When Feeding a Young Child include:

> Nutritional allowance tables are to be used in a flexible manner as a check-up on the individual child's intake in relation to children in general. The results are to be interpreted in terms of the individual child, his size, activity and growth. Children vary structurally and functionally and have different metabolic patterns. They also live in a variety of families. It is not surprising, therefore, that food intake varies widely from one healthy child to another.
>
> The child has needs for the present but is also building for the future in terms of body structure and food habits. A famous nutritionist's comments of long ago is still true: "One year of good feeding at the beginning of life is more important than ten after forty, and a baby's needs are not to be judged by an adult's inclinations. Feeding must be a matter of principles and not impulse; the reward will be partly in the present--much more in the future." (Rose, [illegible], p. [illegible])
>
> This period is important in establishing a normal appetite, good attitudes toward food and good food habits. The adult is responsible for the choice of food placed before the child and the way in which it is prepared.
>
> The child's needs for nutrients are highest in relation to his size

than those of an adult and his digestive capacity is smaller. Therefore, foods providing a greater variety of nutrients are to be preferred over those containing a few nutrients.

The young child's digestive tract is still immature. Therefore, foods which can be digested easily are selected. The child needs to be protected against foods that will irritate the lining of the tract, such as foods high in roughage or highly seasoned.

Consider the whole child. He needs "psychological vitamins", meaning love, affection, tenderness, patience and understanding, as well as chemical vitamins. He needs these for appetite, digestion and absorption of foods, since emotions influence the activity of the digestive tract and the desire to eat.

Young children go on food jags. A child may eat large quantities of one food for a time, then taper off or stop eating it entirely for a while. Later he will return to it. Children have been known to eat as many as five eggs or four bananas at one sitting. (C.M. Davis, 1937)

A preschool child's "no" at the table may have one of many meanings, such as lack of appetite, refusal of a specific food, assertion of a sense of autonomy, a kind of communication with an adult, a reflection of conflict with an adult, or imitation of another child.

The young child is often slow in eating and dawdles. He may become tired in the process of feeding himself, for he is still not adept at this process of self-feeding. A helping hand with the last bites may be advisable. Dawdling may be reduced by making the eating process as simple as possible. Utensils can be selected that will facilitate eating. Foods such as soup or soft custard can be drunk from a cup more easily than spooned out of a dish.

A young child sometimes wants to be independent, sometimes to be dependent. This is true at mealtime.

Young children tend to make a ritual of eating, as they do of other routines. Perhaps foods are eaten in a specific order; perhaps a particular spoon or dish must be used; or the table must be set just so. When these rituals are respected, mealtime tends to go smoothly; when disregarded, the meal may be disturbed and little or no food eaten.

Adults can have certain expectations for the child at mealtime provided these expectations are appropriate, understood by the child, and made with flexibility.

Young children have preferences. They like simple, unmixed foods; [illegible] ing anything dry. They prefer food which is not too hot or too cold. If food is too hot they may not have the patience to wait for it to cool. They may let the ice cream melt before eating it. They like foods that are easy to eat. "Finger foods", foods they can pick up, are popular. Carrot and celery sticks, pieces of lettuce, cabbage, etc. furnish an excellent way to introduce the foods which they will meet later in salads. Some young children in the second year will eat vegetables more readily if they can pick them up with their fingers. A whole string bean may be acceptable, but beans may be rejected when cut up, cooked, and served with a spoon.

Each child has his own particular preferences. These preferences may refer to specific foods or to ways of preparing them. Children vary in the number of foods they like and the intensity of their feeling about individual foods. Most children like what they are accustomed to having. Therefore, as said before, early experience with a variety of foods is important. It is wise to respect children's preferences. No child need be expected to like all foods. His nutritional needs can be met with various combinations. A healthy, happy child will eat a wide enough variety of foods to meet his nutritional requirements. (5)

"Feeding Little Folks", (6), a 20-page booklet, 1965 publication, by the National Dairy Council, presents much the same facts in condensed form. A smaller six-fold leaflet, "Food for Young Children", (7), 1965, published by the same organization, is also basically sound information.

The specific nutritional needs in terms of the physiological growth of the young child is described most effectively in the continuing classic reference on nutrition for young children. (8)

"Following the period of very rapid growth in infancy, the rate of growth diminishes gradually to the lowest level of childhood during the second and third year. Energy needs per unit of body weight are low during this 1½ to 3 years of age as compared to needs in infancy and later childhood and adolescence. The tendency is to shift to a high [illegible] carbohydrates, sugars and starches, but studies show that ample protein in the diet is the main need for the muscular growth demanded by [illegible], standing upright, etc. The [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible], and [illegible] through lack of sufficient protein, [illegible] [illegible] [illegible] [illegible] [illegible], and the result is a child with [illegible] [illegible] and [illegible]. The [illegible] [illegible] [illegible] [illegible] [illegible] of calcium, phosphorus and Vitamin D. [illegible] of [illegible] body weight and [illegible] [illegible] make the daily allowance of [illegible] for [illegible], Vitamin A, thiamine, riboflavin and niacin and ascorbic acid.

(See the poster A Guide to Good Eating - Dairy Council)

This chart shows the basic 4 as a guide to a good diet for [illegible] people and an [illegible] [illegible]. The diet in a [illegible] [illegible] [illegible] [illegible] is [illegible] [illegible] to A Guide to Good Eating (9) and Daily Guide to Good

Eating--and How to Use It (10), both free of charge from the National Dairy Council or Dairy Council of California; also shown is Food Comes First, a Daily Food Guide (11), a single sheet, color publication put out by the California State Department of Public Health (publication being discontinued), is an adaptation of the original basic 4 idea Food For Fitness, a Daily Food Guide (12), put out by the U.S. Department of Agriculture.

Concepts to be presented: around-the-clock food intake, seven days per week and weeks upon weeks, to include foods in balanced amounts from all of the basic 4 groups.

Taken from the back of A Guide to Good Eating:

The Meat Group is misnamed, for it includes fish and fowl and also eggs, dry mature peas, beans, lentils and nuts (peanut butter). Note that one ounce cooked lean meat, poultry or fish is about equal to one egg, or one ounce of cheddar cheese, or two tablespoons of cottage cheese, or two tablespoons peanut butter, or ½ cup cooked, dried beans or peas. The dried legumes and nuts should be served with milk to gain added protein of animal source and therefore high biologic value.

Vegetables and Fruits Group - Dark green or deep yellow vegetables or yellow fruits are necessary for their Vitamin A content; citrus fruits, tomatoes, cabbage (for Vitamin C) should be eaten every day because Vitamin C is not stored in the body-fresh, canned, frozen but not overcooked; raw is optimum for nutrient retention and good chewing.

Breads and Cereals Group--Emphasis must be on enriched or whole grain cereals or flours--oatmeal is a whole grain, as is cornmeal, whole wheat flour and graham crackers. Read the label on bread, the Italian pastes and crackers for the word "enriched" and require the baker to say-show enriched flour is used. The "staff of life" is not measured by "squeezing fresh". If whole grain or enriched flour is used, plus milk, and possibly egg in the dough, the baked product will supply protein (vegetable and animal source), B vitamins, iron and carbohydrate energy source.

The booklet, "Nutrition--Better Eating for a Head Start" cannot be improved upon.

"Meal Patterns" for a day at the Head Start Center are given which may be needed if the Center is to serve breakfast, a noon meal, and a mid-morning/mid-afternoon snack or both.

Amounts to serve little people--"Size of Servings" and "Food Plan for One Meal and One Snack". The noon meal is likely to be the largest meal of the day. A mid-afternoon snack could be milk and peanut butter cookies, or a piece of cheese and fruit juice. Evening supper--split pea soup, milk, apple, orange or banana. (Note especially size of servings for little people: being over-stuffed is not comfortable! and too large amounts are frightening to even contemplate.)

Note "Individual Differences in Children", "Children's Reactions to Food" and "Establishing Routine". Remember, children differ in every particular; they also differ in acceptance of food, and differ in their reactions to food and to the process of eating.

"How to Bring Children and Food Together Happily" concisely gives the points for the importance of and how to gain:

1. a good emotional environment.

2. a good physical environment. There is no real virtue in the middle-class-adult routine place-setting of fork, knife, spoon and napkin set just so! There is virtue in what is clean, comfortable and manageable by tiny hands and feet that don't coordinate on command yet.

3. attractive food--this doesn't mean "decorated up" or fancied to ad nauseum, even to little people.

4. "Mealtime--a happy time". A hungry child likes to eat. He cannot eat if he is excited or tired or too over-joyed or has reproach or admonishment hanging over him.

Serving food to little people: Family-style is best when possible, at tables of six with an older child or adult to keep things moving smoothly. This leads naturally into the HEAD START Program's position--that the child's family is an important entity to be considered, incorporated, and hopefully influenced by the Project's nutritional phase, as well as other phases. The child's talk about "what we had to eat today at school" is heard and has greater impact than we realize, be it talk of "our carrots crackled", "I could drink out of that cup", "we sit down with Alice", "the milk comes out of a package--I saw them mix it with water right out of the faucet and then into the refrigerator", or "we eat when that church bell rings almost every day."

A part of the Project HEAD START Nutrition booklet is entitled "Safety and Sanitation" but deals largely and effectively, if in brief, with Sanitation, almost to the exclusion of safety, except for the storage of poisons and toxic materials--insecticides, bleaches, etc. Safe work habits and practices are so incorrectly taken for granted! The tiny leaf of celery on the floor can be a fatal slip for any age helper and small child.

The California State Restaurant Association's Safety Training Manual (13), 31 pages mimeographed, is unique in the specificity of three pages of instructions dealing with "Specific Work Habits"-in which are stated eight safety factors on Fall Prevention Practices, eight points on Safe Use of Knives, six on use of Common Kitchen Machinery, eight points on China and Glassware, twelve safety practices for use of Heat, Electricity, and Gas, six safety factors in Food Preparation in General, ten safety practices dealing with Serving and Clearing, and seven safety factors on Receiving and Storage. Safety has to be the public food server's business--and it is HEAD START feeding program business too. The young child learns what he sees you practice--be it a safe or unsafe practice! We adults would benefit by blazoning these safety practices into our work patterns. Home is still more dangerous than the highways--HEAD START can help this new generation make it Home, Safe Home.

An excellent sanitation booklet with some safety emphasis too is the Food Service and Sanitation Manual (14) prepared by the Utah State Department of Health, rev. 1962, 71 pages, printed.

The Sanitation directives of the HEAD START NUTRITION booklet are minimally adequate instructions. You do know:

1. the "why" of the danger of luke-warm storage of, say, boiled drained spaghetti or other starches;
2. how cold the refrigerator should be at night, and that 36°F. can rise to over 50° easily if you open and close the door too often during the day;
3. that air must circulate in a refrigerator so that circulation must not be blocked off by too-tight packing of containers---side smack against side (use round ones);
4. that because the air circulates, vegetables and fruits get limp (dehydrate) unless in relatively air-tight (plastic) wrappings or crisper drawers;
5. that all foods stored in the refrigerator must be washed first, especially fruits and vegetables, under running water. Why the running water?--pesticides and chemical fertilizers are a necessary adjunct to these crops.

See"Is Pot Luck Lucky?"(15), the small multi-fold put out by California State Department of Public Health, which by word and picture gives the necessary practices regarding safe storage of specific foods. It's all there--I wish it hadn't been designed so cute in form and title, for this is serious business--people of all ages do not deserve food poisoning!

On Food Storage- the multi-scientific, technical facts in Food Storage Guide for Schools and Institutions (16), U.S.D.A. Agricultural Marketing Services, PA-403, 1959, 42pp., price 25¢ - can be digested down to:

1. Cleanliness in the storage area--always!
2. Rotating--place new delivery at back, have a regular turnover, and no long, long storage of anything except salt.
3. Dry area for dry foods--moisture invites growth of destructive microorganisms.
4. Keep forzen foods frozen until use--and do not refreeze thawed products.

5. Refrigerator kept clean--everything placed in it clean and covered.

6. Wash all fruits and vegetables under running water before doing anything else to them--storing, peeling or whatever.

7. Special caution in refrigerating--have it cold enough to prevent salmonella bacilli infestation of cream sauces and egg-based dishes.

8. Week-long storage of high water content fruits and vegetables is a doubtful practice: nutritional value deteriorates, and from field to market is already too long in most cases.

9. Bacteria molds and yeast thrive in warmth with moisture. If you can't keep hot foods hot and cold foods cold, serve them quickly.

10. When in doubt, don't serve it!

Food Buying for HEAD START (Storing and Preparing):

Cite Food Buying Guide and Recipes for Project HEAD START (17), Office of Economic Opportunity, June, 1965, 49 pages, multigraphed.

> Note especially that purchase is figured on size of serving per young child for groups of 10, 25, 50 children. For instance - spaghetti or rice: 1 lb. yields 9 cups cooked, ¼ cup per young-child serving. One quarter pound is needed for 10 servings; 3/4 lb. for 25 servings; and 1½ lbs. for 50 servings.

A great buying guide this is! There are sound recipes any reasonably experienced person can follow. Common measures and temperatures are given. You're in business if you use this plus common sense and have willing hands to help.

Food Preparation:

The University of California Agricultural Extension Service has a series of "Hows and Whys" of Cooking Vegetables, Baking, Meat, under the general title "Science of the Kitchen Series" (18) at 10¢ per copy. We couldn't supply you with copies but they are well worth ordering from the headquarters at the Berkeley campus. Food preparation know-how should be this combination of how and why and not just a following of recipes, for it's so much more fun and satisfying to know why you are to do what the recipe tells you to do. Conserving the nutritional value in foods as you prepare and cook and serve them is the major concern, along with having the result attractive and palatable. "Conserving the Nutritive Values in Foods" (19) is an excellent bulletin of the U.S.D.A.

Some General Rules:

1. Use cooking utensils that fit the burners and are appropriate in size to the volume to be cooked and have tight-fitting covers.

For baking have the pan appropriate to the volume of the batter or dough and allow for steam to escape. Uneven-surfaced pans produce poor products, burned-dark pans produce too dark brown products and too shiny pans, too light--and it's fun to learn why.

2. Cook vegetables and fruits in as little water as possible and have the water about steamed off when the product is done. "Crisp-tender" is the guideword for vegetables if you must cook them for palatability. Serve them raw as much as possible except when little people can't tolerate the roughness of celery stalk strings, for instance. The valuable mineral content of vegetables and fruits leeches out into the water, and if you drain it down the sink, there goes a part of the reason for serving them at all--money is wasted, and the child is not getting the nutrients.

3. Heat destroys many vitamins but foods must be made palatable. Cook vegetables rapidly--in relatively small batches if possible. You have to weigh between high heat (240°F. in pressure cooker) and shorter time (1/3 of the time usually) versus boiling for a longer time at 212° (at this sea level).

4. Oxygen (air) destroys--especially vitamins. Cover tightly things such as cut cabbage for slaw, strips of carrots, celery, string beans, cauliflower buds, etc. Cut apples, pears, bananas, peaches, apricots, etc. turn brown when exposed to air--browning can be deterred with citric acid or compounds prepared for deterring browning of fruits being prepared for freezing.

5. Oven-fry instead of pan-fry. Less fat is needed, or almost none as on chicken which has enough natural fat. In the case of the chicken the fat will ooze out and lubricate the muscle tissue and the oven heat will evenly brown it.

LANGUAGE DEVELOPMENT AND THE YOUNG CHILD

Alberta Siegel
Associate Professor of Psychology
School of Medicine, Stanford University
Editor, Child Development

One of the purposes of a HEAD START program is to aid the children in language acquisition. In order to be able to speak about this process, I want to tell you something of what we know about language development in all children.

Children speak first in isolated words. The single words stand for a total idea. "Shoes," means "I want to put on my shoes." Then they come to speak in telegraphic sentences, which are sentences in which only the most necessary words appear, like "I put on shoes." Then their sentences become longer and more conventional.

As children begin to speak, they regularize the language. In doing this, they demonstrate that what they have learned is not simply isolated words, but instead they have learned the whole structure of language. When a child says "I runned," he is showing us that he has some grasp of the past tense and of our usual way of converting a verb to its past form. Similarly, children learn that we form plurals by adding an "s", and they will do that not only when it is appropriate, with "toy" and "toys" but also when inappropriate: they'll say "child" and "childs." Or they will say "man" and "mans." This kind of regularization of the language shows that they not only have learned isolated words but also the whole anatomy of the language in a very sophisticated way. It is only later that they grasp all of the complexities and irregularities.

In almost all children mastery of the spoken language comes before mastery of the written language. It would be an extremely atypical child who would learn to read and write before he would learn to speak. People who are attempting to teach children to read and write start with trying to teach them the words that the children already can speak and understand. Eventually, as you know, we get to the point where we have words that we can recognize in writing that are not in our spoken language but that is a very sophisticated later development. The usual progression is first an understanding of the spoken word, then an ability to speak that word, later an ability to read that word, and then finally, the ability to write it. However, it is always the case that people's passive vocabularies are larger than their active vocabularies. That is, the words that we understand other people say form a larger vocabulary than the words that we are able to use ourselves. And similarly the words that we recognize when we see them in writing form a much larger vocabulary than the words we ourselves use in our own writing. It's these words that we understand when we confront them that we call the passive vocabulary.

How many of you have seen those ads from the Berlitz School? They show a little Eskimo child, four-year old, and they say, "He can speak Eskimo, why can't you?" It's always a young child who is shown in these ads--the point isn't that an adult can speak that language, but rather that a young child can. It is true that wherever we go around the world children do master their own language during the very first years of their lives so that a five or six year old in an advantageous environment is a fairly sophisticated user of the language in which he has been immersed. However it is the case that not all the children who grow up in a linguistic community have very adequate experiences with the language of that community and such children when they enter school are at a profound disadvantage. As I mentioned it is an aim of the program like HEAD START to be sure that the children who are in the HEAD START program don't enter school with a linguistic disadvantage. The question then becomes for the HEAD START teachers, "What can I do to aid language developnent in the children in the HEAD START program?"

You all know the story about the person who discovered that he had been speaking prose all his life. Or you know the story about the centipede who attended a lecture on the physics of motion and was so stunned by how complicated his locomotion was that he never moved again. That's a bit the way that it is with language acquisition. Given any luck at all, a child grows up in an environment in which he simply learns to speak--he learns to speak very well and nobody knows that he's teaching him how to speak and nobody's given much thought about it. It's just the case that he learns to speak. It's a little like vitamins. People were getting vitamins hundreds of years before anybody ever heard of them. It's only when people suffer from a vitamin deficiency that you get interested in the whole question of vitamins--it's only when you have these British sailors who have scurvy that you begin to ask, "What is it that is deficient in their experience that's creating this illness?" Well I think that it is that way with language deficiency. The components of language learning are like vitamins. They have been around much longer than we have known about them--or thought about them--and we have been doing very well indeed. As a matter of fact, teaching, like nutrition, is still more an art than a science and if we were to restrict the foods that we present to our children to only those that we know contain essential ingredients we would probably rob them of a lot of ingredients which are in fact essential and which we haven't identified (as yet) as essential. So what I'm raising is a sort of fish and water problem. With respect to language acquisition most children are like fish in water. They grow up in the environment that they need and never know that they had that environment. And the people who are giving it to them never realize that they are giving it to them. But when we look at children who suffer from language deficiences, then we can begin to identify what those vitamins must be that the other children are getting and that these children aren't getting.

A good deal of what we know about child development today is based on studies of children who grow up in institutions which provide them with a very different kind of life than is provided for children in a normal home. These children are profoundly different from other children. So then we have begun to examine what is it about these institutions that differs from the usual home experience and we thought that it might be vitamins that are lacking in the situation. And actually one of the interesting things about institutionalized children--children who are brought up in a rather cold, indifferent environment in which they are in the care of a number of adults who may care for them as well as they can but come in and out of the lives of other children or the children go in and out of their lives as they are moved around from institution to institution--is that they are retarded in language. This has been found not only throughout this country but also in other parts of the world in children who grow up in institutions.

It is also the case that children who grow up in urban slums seem retarded in language when evaluated by the standards of the school. It isn't clear if they would be as retarded if we had some way of evaluating the adequacy of their language for their culture. But we don't have any way of doing that and in a way it is just a bit beside the point because we are not attempting to educate them for that culture: we are attempting to educate them to move into the mainstream of the larger culture. But it is the case that children who grow up in urban slums also are deficient in language and through our study of them we have gotten some notion of what may be the nutritional elements of language development. I'd like to take a few minutes discussing these. I think they are going to sound very general to you--unspecific. And they are. In fact what I am really going to be talking about is "how do children learn anything?" Not just "How do they learn language?" But "How do they learn anything?" What are the conditions for learning in general.

The first thing that seems to be important is that children learn what is relevant to their lives. Of all the things that are going on around them they pick out what is relevant for them. For example, the first word that most children speak is, "Mommy." The very early words are the names of their brothers and sisters and a word for Daddy. Of all of the things that are happening around them the most significant things that are happening are that they are relating to these other individuals and of all the words that they might learn the words that they do learn are these relevant words. Another thing that children learn very early are the parts of their own body. When I'm driving down the freeway and young children in the car are acting up I say, "Let's play a game: show me your eyes; show me your nose; show me your mouth; show me your ears," and a very young child can make these differentiations. "Show me your knee; show me your big toe; show me your little toe." He doesn't know who the President of the United States is; he can't read the alphabet; there is a lot going on around him that he doesn't know about yet, but this thing that is relevant to him he knows very well. A child was hospitalized some years ago who had a thyroid tumor. As a result of this tumor he had to take in enormous quantities of salt to survive. This child ate nothing but salty foods. He learned to climb up on the shelf in his mother's kitchen to get to the salt cellar to take salt. He liked potato chips and pretzels and all those kinds of foods. And his very first word was, "salt." It was absolutely essential for his survival that he take in enormous quantities of salt, and that was the word he learned. This is the kind of thing I mean when I say children learn what is relevant to their own needs and their own lives.

Now a second thing about children's learning is that they learn what is rewarding. And so do adults, by the way, but children are a bit craftier about it. Children learn the things that will get them a smile; that will get them a hug; that will get them a pat on the head; that will make an adult say they are good; that will make an adult say, "you are doing very well," or "you are a good boy," or "you certainly know a lot." Children will learn to do the things that will get them food, that will get tnem candy--crackers. Children are like other organisms. They are motivated by the need for reward. One of the most powerful approaches to teaching children is to figure out what is rewarding to them and to figure out what we want to reward.

A third thing that I would say about children and their learning is again something that every parent knows. Children learn by imitation. Children are great mimics. This is especially true of very young children; ages three, four, five. There is a whole raft of studies being done now on imitations in children, attempting to discover who it is that children imitate; what kinds of behavior they imitate; when they are most likely to imitate, etc. This research is very interesting but the most overwhelming finding is that they just imitate, period. Children are just great mimics. It is the case that they are especially prone to imitate adults whom they like, whom they admire and look up to--these adults they especially imitate. It's also the case that they imitate adults whom they see as being powerful and effective. It's not only the warm and nurturant and kind adults that they imitate. It's also the powerful ones,the competent ones, who get imitated by children. And I think it is important that we mention that children imitate not only adults but they imitate other children, especially children who are somewhat older than they are; somewhat more important than they are, and somewhat more effective than they are. Five year olds imitate seven year olds and seven year olds imitate nine year olds, etc., and this is the way that fads spread. A fad will start with maybe eighteen year olds. Pretty soon the sixteen year olds are picking it up. Then the fourteen year olds are doing it. The same thing happens with clothing fads and other fads. The younger kids tend to imitate the older kids. It is also true that two year olds imitate three year olds and three year olds imitate four year olds and four year olds imitate five year olds; so children learn from what they see other people around them doing.

So these are three things about children's learning. They learn what is relevant; they learn what is rewarding, and they learn what they see other people doing.

A fourth point is that children learn what is effective; what makes them feel effective. If a child discovers certain behaviors that give him a sense of mastery, a sense of competence, a sense of being able to do things, a sense of being able to manage his environment, this kind of behavior gets built in. Much of what you see in children's learning is of this character. They like to walk for the sheer joy of walking and for the sheer mastery. It is also true that they are imitating when they learn to walk, it is also true that they are rewarded when they learn to walk, but there is an additional thing about learning to walk: a kind of effectance, a sense of competence, which the child gains. In that sense, learning is its own reward. I think that this has a lot of implications for language because you see language makes a person effectant--makes him competent and gives him a sense of mastery over his environment.

A fifth thing that we can say about children's learning, and this applies to the group that you are going to be working with and it also applies to children who are a little older, is that learning occurs through identification. Identification is a little more sophisticated than imitation but it is in the same ballpark. When we talk about a child identifying with someone, we are talking about his admiring that person very much and wanting to be like him. And the most common identification, of course, is a child wanting to be like his parents. You have probably all had the experience of seeing a four-year old or a five year old and thinking, "That must be Jim Jones' son because he walks like him, he smiles like him, he slurs his words like him, and he has that same crooked smile." There is always that incidental kind of learning that nobody ever taught this child but that he picked up because he wanted to be like that other person. Very typically, young children of four, five, six and seven have people who are their ideals and they pick up these people's mannerisms and style of speech and gestures and the way they walk and their style. They also pick up their values and their ideals and their attitudes. Now actually the people that children identify with are the same people that a little while earlier we said they imitated. There are the ones whom they admire, the ones who have been good to them, and the ones whom they see as powerful and competent and effective, and of course for most children this means their own parents. But also, as any teacher knows, it means their teachers. When we ask children who are the people they admire most, the commonest answer is their parents and the next commonest answer is their teachers. Most teachers have had the experience of a child having a "crush" on them and wanting to be like them and trailing after them and cutting their hair the same way, and wanting to wash the blackboard for them--this is what we mean by identification.

This is the time to talk about the fact that if children learn by imitation and by identification then it's a lot easier to learn to be a girl than it is to learn to be a boy. Young children have many more opportunities to imitate adult women than they do adult men and to identify with adult women than with adult men. You don't have to open your eyes very wide to see that this is largely a female audience and this makes me wonder right away if Project HEAD START isn't going to turn out to be more effective with little girls than little boys, insofar as children learn by imitation and identification. It makes me wonder if it isn't the little girls who will have more opportunity for learning than the boys. How many of you have ever been in a nursery school where there was an adult male? Have you ever seen such a popular guy? I think that anyone who has had the experience of having males in a nursery school knows how important they are for the children in the school and how the children flock to them. I take medical students to visit nursery schools and I say to them, "Just watch what happens when you come into the nursery school." Well, they are like Pied-Pipers; they just wander through and the children trail after them. And I say, "Just start doing anything and watch what happens." And so one student will wander over and he will start building blocks and within thirty seconds there are three little children around him building blocks. Another one will pick up a hammer and start hammering nails and pretty soon every hammer in the place is in use.

It is the case that we have many children today who are growing up without a male in their own homes. Many of these children, in fact show up in HEAD START because as you all know, if you don't have a male in the home, you probably don't have an awful lot of money since it's males who make money. In a program for families with limited incomes there will be many families who are one- parent families and the parent is a mother. So it's especially paradoxical not to have males in the HEAD START program because many of these children come from homes where there is no male either. If you can recruit volunteers for your program, try to recruit men. You can promise them that no one will love them as those kids do. Some Stanford medical students work as volunteers in a child care center in Palo Alto. This is a child-care center that has children who are very similar to the kinds of children who are in HEAD START programs. These medical students just hate to leave that center and go back to their studies, dedicated as they are to these studies because it is just so gratifying to them working with these children. They show their need for men so clearly, and these students get this great sense of being attractive and lovable and worthwhile and grown-up because these children admire them so much.

A sixth point I want to make about learning is that children learn what they practice. Children learn what they get to repeat over and over and over again. Anybody who has watched a child knows how many hours he puts in on working on the thing that he is learning. When the child is first learning to walk you can't stop him. All he wants to do is walk. When he first learns to pull himself up in his crib he pulls himself up but he can't let himself down because he hasn't learned that yet and so he cries and then somebody sets him down and then twenty seconds later he has pulled himself up again. Or consider when children first learn to let go. Children learn to grasp first before they learn to let go, and at an early age, their letting go is really involuntary. Then later they learn to voluntarily to drop and that is the great age when they drop something and you pick it up and they drop and you pick it up, etc. Well what I'm saying is that when children are learning a new skill they practice it and they rehearse; they go over and over and over their new skill. If we don't want children to learn something we don't let them practice it. We don't let them stamp in the learning. If you don't want a child to run out into the street then you wouldn't let him run out in the street and then take him and bring him back and let let him run out again. What you would do is prevent him from getting out there in the first place because what children practice is what they learn.

Another thing about children's learning is that children seem to learn best in a calm, friendly environment. As I say, I'm not being very specific tonight and the things I'm saying are not very surprising. But it's not always easy to maintain such an environment when you have a lot of kids around making a racket. Yet it seems that that is the kind of environment that children learn in most effectively.

The final thing that I would say about children's learning is that children and adults learn the things that contribute to their sense of self-esteem,to their feelings of worth. If we had to mention one need that all human beings have, one emotional need, it would be that people need to feel worthwhile. They need to feel that they can admire themselves and that they are acceptable good people. Part of the task of teaching children is to define what they have to learn as things that are going to make them more worthy and more admirable. This isn't always obvious for the child because he may come from an environment in which the things that are esteemed are different from the things that you are trying to teach him. We all know this in the case of children who come from highly aggressive environments in which we try to teach the child to be cooperative and to share and not to hit back. His attitude is, "What are you, some kind of a nut?" because in his environment that isn't what is valued, and it doesn't contribute to his esteem for himself to think of himself as not being a good fighter. I think that one of the most effective ways that you can work with children is to understand what the values are that they have and what is going to contribute to their own feelings of being worthwhile human beings and then to build on those senses.

I have listed eight different things about children's learning that are general, not specific to language learning. I want to go over them again to talk about them in terms of language acquisition.

First, I said that children learn what is relevant to their lives. Of all the things that they could be isolating in their environment and thinking about they choose the things that are most relevant to them. This means that in language they first identify with things that are most important to them and when we are working with language acquisition we work on these important things. Have any of you ever met a child who didn't know his own name? This is widely reported about children from very disorganized backgrounds--they don't know that they have a name and they don't know what that name is, and this obviously would be where you start in language development. I think these would be younger children than the five-year olds who are coming in to HEAD START. But it certainly is the case in New York City, where some of the research is done, that some of the children come in not knowing their own names and not knowing that they have a name. And to teach a child that he can say his name and that it's always his name can be the beginning of a beautiful friendship. And of course your name is significant to the child and he wants to learn your name and he wants to learn to say your name. These are the kinds of things that I'm thinking of when I say that children learn what is relevant to their immediate experience. Therefore the kinds of words that you can work on in language acquisition are the words for what is going on right around them: names of their friends, their own names, names of the equipment, names of the colors, etc.

When we say that children learn what is rewarded it suggests that when children do speak it is probably a good idea to compliment them for speaking and to reward them for speaking. Actually the form of reward that means the most to many children is the attention of the adults around them and one thing that has been successful with children who don't speak very much is for an adult to sit and write what a child is saying. That is so fantastic, that anyone would care, would actually write it out and then read it back to him. That is a way of rewarding the child for language. Another thing that has been done is tape-recording of children's language. It is a sort of jazzy thing for a child to speak into a machine and have it speak back in his language. It is very rewarding and it makes him feel very important and it makes the activity seem very important to him.

Another thing that I mentioned is that children learn by imitation, and of course the implications of this for language are very obvious. If we want the children to learn to speak good clear, school-teacher English we will speak good, clear school-teacher English. They certainly pick up very quickly and what we try to do is to provide a model for good English.

Another thing I mentioned is that children learn by effectance and one of the things that I think that is most useful in teaching a child language is impressing him that it makes him more effective. If you can get him to carry messages or if you can get him through the use of words to somehow become a more adequate person then you are giving him a reason to use language. Often singing does this but any little tricks that you can work out that enable the child to see that it pays to use language, that it is going to get him someplace, that it's going to make him a more adequate person. It seems to me that in evaluating a preschool program you can look and see: "Are we making our children feel more adequate when they use language?"

The same thing can be said about identification that I said about imitation. Children do learn language by identification. They typically speak with the accent of the person with whom they are identified rather than with the standard accent that they hear around them. One of the things that always baffles people is how is it that children can listen to television hour after hour and never learn to sound like a radio announcer. Well, he's not the model they are taking. They are taking the model of people with whom they identify and theirs is the speech that they are going to acquire. And so anything that you can do to become a significant person to a child makes it more likely that a child will learn your language. Children don't learn the language habits of teachers who are distant from them, who aren't very meaningful in their lives, who seem alien to them, who seem cold and uninvolved. But the ones that they identify with are the ones who are warm to them and form some kind of personal relation to them and who seem somehow meaningful in their lives.

The next thing that I said is that children learn through active practice. The implication of this is hard for people to grasp if they have grown up in traditional schools. I don't know what your school experience was but mine was that we were meant to sit in silence and that the good child was the child who never spoke except when spoken to. That system may make sense at some age with some children, but if you believe that children learn by practice and if what you are trying to teach is language then it's hard to believe that silence is golden. What you're backing yourself into is a chatterbox classroom where there is an awful lot of conversation going on. A class situation where silence is the rule will be a situation where speech is not practiced. So that the nursery school where children learn to speak is going to turn out to be a noisy place where lots of children are practicing this new skill.

I mentioned also that children learn in a calm, friendly, environment. How do you reconcile that with children needing to practice their speech? Well, I guess it means it's nice to have some space so that they can spread out. It's easier to have a roomful of chatterboxes if it's a big room than if it's a tiny one.

And of course this business about children learning the things that contribute to their self-esteem goes back to some of the things that I have already said. How to create in the child the sense that language is important and that he is a better person for being an effective speaker. This is the central task.

Let me finish by making just a few somewhat more specific recommendations. I think that a HEAD START teacher will want to encourage children to talk. It doesn't sound very profound but anything that the teacher can do to encourage the children to talk is going to be a step forward. A second point I would make is that probably there would need to be lots of individual conversations. The model of children all sitting around in a group and all oriented to one teacher may be appropriate for other children at other times but it may not be the thing that is going to work for these children. Again, this may suggest the need for volunteers so that the individual child can have an individual face-to-face conversation with an individual adult. The third thing that has proven to be effective, over and over again, is reading. Reading to children in school and encouraging their parents to read to them at home. People are often baffled about how to bring parents into the preschool education program, and they often have very great ambitions like the parents should love the children more. Well, I don't want to knock love, but it's awfully hard to tell somebody to love his child more. It's not so hard to suggest that he read to his child every day. This is a concrete practical suggestion that doesn't come as too much of a surprise and may be a useful reminder, and if there are books in the school that the parents can take home and read these will provide a ready-made opportunity to involve parents and to give them a feeling of participating. All of our research shows that the parents are the principal speech models and anything that they do is going to have more effect than anything anybody else does. When parents read to their children this encourages language development in the children.

Now another thing that I think needs to be pointed out is that all children make mistakes when they speak. Children who come from disadvantaged backgrounds probably make more mistakes when they speak than other children. My own feeling is that it probably doesn't help to correct them to say, "Don't say singed, say sang," or to say, "That is wrong, Johnny, we don't say singed, where did you ever hear that?" I think that those techniques will succeed in making the child shut up but they won't succeed in making the child learn correct speech. It is interesting that when we study what parents do with their children when teaching them to speak--what we observe is that parents don't actually correct the child in that sense. What parents do is called expanding on the child's speech. I want to give you an example of this. This is from a thoroughly middle-class family with a bright child, a two-year old. The child said, "See truck Mommy, see truck." The mother said, "Did you see the truck?" The child said, "No, I see truck." The mother said, "No you didn't see it?" There goes one." The child said, "There go one." The mother didn't say, "Look you dumb kid why did you say 'there go one?'" Instead the mother said, "Yes, there goes one." You see, she didn't correct the child in the sense of pointing out that he had made an error instead she replaced what he had said with the correct phrase. He said, "There go one." She said, "Yes, there goes one." The child said, "Put truck window." "Put the truck where?" "Put truck window." "I think that one's too large to go in the window." Now what was going on was a dialogue between the parent and the child, not any kind of instruction. But what the parent was doing was supplanting the child's language with a more sophisticated language. This is another example. The child said, "Baby highchair." The mother replied, "Baby is in the highchair." Then the child said, "Mommy, eggnog." And she said, "Mommy had her eggnog." And the child said, "Eat lunch." And the mother said, "Eve is having lunch." And the child said, "Mommy, sandwich." And the mother said, "Mommy will have a sandwich." The child said, "Pick glove." The mother said, "Pick the glove up." Well you see this is what mothers do all the time. They expand the child's language and regularize it. They don't land on the kid and make him feel that he is wrong but instead they take what he offers and they expand on it. Now these are not sophisticated nutrition experts, these are just mothers who happen to be giving the vitamins without knowing that they are giving them. I would very strongly urge you to make your interactions with the child on this basis rather than on the basis of remonstrating the child, suggesting that what he had said was wrong, implying that he is no good anyway and furthermore his parents are no good either because they taught him to speak that way. This is the kind of thing that alienates these kids from school. There is a more integrative way for dealing with the child: you accept what he says and then you provide a correct model. So when he says, "I ain't going." You say, "You aren't going." You don't repeat the ain't and neither do you say, "Where did you learn to say 'ain't'?" Or, "We don't say ain't in this school." But without making a big deal out of it you provide different alternatives for the child. As I say, I think that these remonstrances, or implying that the child speaks an inferior version of the language, are not going to contribute to his self-esteem; they are certainly not rewarding; they are not going to make him like you and want to imitate you, and they are not going to encourage him to practice speech. So it is very hard to defend these kinds of practices as really contributing to linguistic development.

Another thing that has been tried in HEAD START programs with success is to plan some new experience for the child and then to plan that he will have some verbal learning around that experience. A typical thing for example is to take the child to the zoo and before going to the zoo to show pictures of zebras and elephants and monkeys. You say,"These are zebras, and these are elephants, and these are monkeys." Then you go to the zoo and you say, "You see, there's a zebra, and there's an elephant, and there's a monkey." And then when you get back you talk it over and you suggest he tell the other children what happened, "What did you see?" Then the child reproduces these words. This interaction between experience and label seems to be the effective way of adding language for the child.

What we are hoping from this experience is that children will use language more effectively. And one of the ways that we would know that they use language effectively would be if they went home and reported what happened in the school. If they do this and the parents have no knowledge of what happened in the school then the parents can't do this expanding that I was talking about: they can't fill in the missing words for the child. One of the reasons that it is useful to involve the parents in a preschool program when you can is that when the child goes home and says, "Today we went down to the corner and we got an ice cream cone," the parent will know what the child was talking about and if the child can't muster all of the words the parent will be able to fill them in because he knows that there is an ice cream stand on the corner. Or if the child says, "Today my teacher read to me." And then the parent can say, "Miss Jones read to you." The parent can do that kind of expanding only if the parent has some knowledge of what the program is. Quite apart from all the other benefits of having parents in a preschool program there is this advantage of the parent sharing the child's experience and therefore knowing what it is that the child is trying to get out when he speaks to him. This will enable the parents to play the role that we want them to play in advancing the child's language.

SPOTTING, HANDLING AND DISCUSSING PROBLEM BEHAVIOR

Verneice Thompson
Chief Psychiatric Social Worker, Family Guidance Clinic
Children's Hospital of the East Bay, Oakland

The plan for a panel discussion grew out of Mrs. Lewis' request for me to discuss the influence of parent-child relationships on teacher-child relationships. Since my work involves families and representatives of the schools and other agencies in the community, I usually function as a member of a team concerned about some problems or symptoms presented by a child. The solution to this child's difficulties always requires participation and cooperation of someone other than myself and the child. In other words, play therapy with the child is not enough. It therefore seemed very natural to demonstrate a team approach in this panel discussion and I made the proposal to Mrs. Lewis. I was delighted when Mrs. McFarlane, Mrs. Grandville and Mr. Hill agreed to participate in this discussion and I speak for them when I express delight to participate in your orientation program.

Dr. Webster, in his challenging keynote speech on Sunday, indicated that fifteen years ago he would not have predicted that he, a Negro youth from the Fillmore area of San Francisco, would have received such recognition as the request to address this group. Fifteen years ago, I would never have dreamed that this country would be so boldly engaged in a gigantic war on poverty. Today, unlike any other time in our history, the society is actively engaged not only in the repair of the damages of impoverishment but at the same time we are grappling with the causes. Through our well-established social institutions, the church, school and government, we are actively engaged in the pursuit of knowledge and a way of life which will result not only in eradication of poverty but the improvement and enrichment of human relationships. We are not dealing with a problem that can be handled mechanically or with a pill. It is not a problem for Washington. But it is our problem. And the solution requires something of us in direct involvement and personal commitment. I am not talking about the social work dedication syndrome, which has been referred to here negatively. But I am talking, for example, about the need for you as teachers to give primary importance to the development of a positive relationship to children and their families. I am sure that we have all struggled with our discomfort in relation to using such titles and labels as the "culturally, emotionally and/or socially deprived child". But we know that the poor child is deprived in all of these areas. And because you have already discussed the areas of deprivation with resultant effects on the child's development and his ability to learn, I am not going into that now; however I want to emphasize that the sum total of the effects of being poor is that children suffer from poverty of experiences. Whatever HEAD START offers these children and their families has to be offered within the context of meaningful positive relationships. I will go into this in greater detail later.

Educational institutions have failed the poor child in the past. The cause of this failure is complex; this is not our concern in this discussion.

Those of us in the mental health field are keenly aware of having failed to meet the needs of the poor.

The fact of the matter is that with few exceptions, it is very difficult for the poor to obtain services from the traditional community agencies and clinics. These places usually have long waiting lists and there is no time allocated daily for emergency cases. Sometimes the clinics select only cases which they consider to be suitable for teaching (translated this usually turns out to mean the child you may be attempting to refer will have measles when the teaching staff may need a case of chicken pox).

Our failure to meet the needs of the poor is not due entirely to a shortage of personnel to staff agencies and clinics but is due, in part, to our failure to understand the poor person's problem and the way in which it influences his request for service. Most agencies and clinics --burdened with large numbers of persons seeking help, have fallen into the trap of working only with the most treatable patients--usually for what is referred to as "long term treatment". These so-called treatable families have usually come from aspirants to the middle class value system and some have frankly been middle class. The poor families, desperate in their efforts to merely survive, have simply not had full enough stomachs and a developed enough intellect to enable them to play the game, beginning first with getting through the maze of intake procedure, the waiting list and finally into the promised land of treatment. While we write these people off as untreatable (and some of them, as some of us here today, no doubt are untreatable) we have found it harder to identify our failure to see that clinically the parents' resistance to treatment is the problem. I saw a father in my private office for almost a year who began weekly sessions with some variation of a statement that he didn't know why he was there.

Those of us engaged in the mental health and education fields face anew the need as leaders to move ahead and catch up in order to lead the people to whereever they may be going. HEAD START is an innovation to catch up with children already falling behind by age three in order to enable them later to have a choice about getting an education. Without this early preparation these children will have no choice. Their development will be so stunted as to later interfere with their ever getting an adequate education. The success of HEAD START depends on your ability to offer meaningful relationships to children but, even so, some of the children will have emotional problems of sufficient severity as to interfere with their use of these enriched educational programs. If community agencies and clinics are not yet ready, able, or willing to meet the needs of these children for treatment, then we are in real difficulty.

Let's think for a minute about the phenomenon of prejudice, because we know that the vast majority of the children in HEAD START come from a minority background. The danger of talking about problems of the poor child is that with all of our good intentions we set them apart from ourselves and other children. While this may be necessary for a definitive understanding, the risk is that we set up a scapegoat for the projection of our own insecurity and sense of inferiority. When the psychotherapist who is presumed to be emotionally healthy helps a patient who is presumed to be ill or has a problem or a symptom, the therapist may derive some satisfaction from the disequilibrium in the assumed difference in the mental state of himself and his patient. When a teacher, who is educated, has a group of poor children who are not so likely to be eager learners, the teacher may take refuge in feeling different or superior. The children are labeled under "they". We hear "They can't learn" or "they can't be expected. . ." to do any number of things. The psychologists add to this senseless categorizing with constant references to "these" children having organic impairment to account for their hyperactivity or failure to learn. This separation of the self of the teacher or the helper from the self of the person who needs help reflects the teacher's assumed superiority and healthy adjustment as measured by tolerance, helpfulness, and a willingness to put up with these children. Prejudice can be a defense that defines the self, and in a way, can be an ego-supportive measure. As paradoxical as it sounds, we need first to look at the positive and protective ends prejudice serves to enable us to create other means of ego support when we as teachers, psychotherapists, or representatives of the poor, give up these prejudices. I hope, by now, that someone in these meetings has acknowledged that the poor can be as prejudiced as the affluent. When the parents of the poor stop thinking of the White authority as the basis of their child's school problems, they will be twice as upset to consider that they might be contributing to the child's emotional problems. When a middle-class teacher gives up the notion that all poor, or all Negro children are not dumb, it may be terribly upsetting to realize that her own incapacity as a teacher may be contributing to the child's problems. I once worked in an agency where there was an open door intake policy, and social workers were constantly complaining that they could do a better job if they didn't have to see so many patients. As the supervisor in the agency, I persuaded the executive to agree to a plan that would relieve one staff member to take as much time as was needed for interviewing and consultation. Some of the staff reacted with extreme anxiety when they could no longer blame the agency's open door intake policy for their incompetence. To initiate and sustain meaningful relationships with the poor child and his family places a demand upon the teacher to control the projection of her own inferiority onto the children and their families.

Let's look at parent education in the schools. What it is and what it can be. Too long parent education has been confined to the teacher's relationship with the mother. For the most part the family of the poor child has not been a participant in family life education. I have just learned recently to my horror that a nearby community which will remain unnamed has developed a custom of not asking poor mothers to participate in nursery school education because they assume the mothers are too burdened already. You, as a teacher in HEAD START, will have to get mothers in by personal contact. Because of the special problems of involving fathers which Mr. Hill will go into later, I would suggest monthly meetings for fathers at least in the beginning and then later attempt to have them come in with mothers. Our experience in a guidance clinic revealed that before we could invite fathers to come to the clinic, rather than assume they would not come, we first had to look at why we had not asked them to come. We then started asking the fathers to come into the clinic for the first interviews or early in the contact with the family. The fathers not only came, much to the dismay of many of the mothers, who were protesting that many of their husbands were too busy even in his presence, but fathers also expressed appreciation at having been asked! Now this is not to deny the fact that the bulk of the teachers' contact will be with the mothers but I am suggesting that some time needs to be worked out to involve fathers rather than to operate on the assumption that they won't come or that they are not interested. The mothers and fathers need to have specific reasons as to why they are being asked to participate. I would think that the teacher in a straightforward way could tell the mother that she needs her help in understanding the child to enable her to do a better job as teacher. The teacher in turn can offer to help the parents by sharing from her observations of the child. I would suggest that the parent be told what he can do to stimulate the child's learning, like reading to the child, taking him to recommended movies, to the zoo, museums, or walking on the beach in the discovery of nature. The mother can be told just how she can aid the child's readiness to learn. The emphasis needs to be on the development of the child's curiosity to enable him to learn rather than implying that the parents have not been good parents by not exposing the children earlier. Parents can be asked to organize and conduct field trips for children. It is more important that parents do this than teachers. The teachers themselves might participate by preparing the children for getting as much out of the experience as they can and by talking about them and integrating the experiences with them in the classroom later. The teacher will need to be resourceful, to plan to get maximum participation from parents. If mothers brought their children for one hour a week while another teacher kept two groups of children this might be a way to get mothers in for the enrichment they need. People very easily identify with positive authority figures. It seems that if a teacher defines that they will all be engaged in growth experiences, the child as student, the parent learning to be a better parent, and the teacher to be a better teacher, the parents might be less threatened.

In view of our past failure to help the poor, bold steps will need to be taken for us to find ways to do the job. From my experience, first with middle-class affluent groups in private practice and with a working-class group in a family guidance clinic and with the traditional agencies and clinics in the community, I would say that any new approach should attempt to equalize the quality of service to the poor and to the affluent. I would like to suggest a solution which I think can be brought about by gentle persuasion, creative thinking and agitation in the field of education and community planning. The ultimate aim of this solution is to create a new resource and/or the development of new and different use of existing resources.

We need a new kind of resource, a different model, to meet the emotional needs of young children who are entering HEAD START programs. I would suggest the formation of a team of the teacher, an administrator in the school and a very skilled clinician from the mental health field--this could be a person in psychiatry, social work or psychology, trained and skilled in diagnosis, consultation and brief psychotherapy with children and families. It is essential that this person, whom I shall call a Mental Health Consultant, be employed by the HEAD START program. The decision to hire the consultant should rest finally in his compatability with the designated school administrator and HEAD START teacher(s) who will make up the working team. I think it is foolish to demand the full time of such a competent consultant who will either not have the time to work full time in HEAD START or may simply remain in the program until he is able to establish a private practice. The existing community agencies will protest having the control of the Consultant in the HEAD START program; you will hear that it is good community planning to utilize consultation from existing agencies. This is ironic when we consider that these agencies have not been able to meet the crying needs of the poor in the past and also that existing agencies will probably offer trainees for a job that demands experience, skill and a high degree of flexibility and creativity. I know of a HEAD START program in this area which utilizes consultation from an existing training clinic. This clinic sends psychiatric residents to the HEAD START program and the teacher reports that repeatedly the child is "observed" by the psychiatrist (and often "tested" by a psychologist) who then reports that the child is not disturbed. This is of no help to the teacher and the practice of diagnosing a child without dynamic involvement of the parents is outmoded. It is a fragmented part of a diagnostic model in teaching clinics and even here this model is breaking down. I can't emphasize enough that a consultant should have considerable experience and a reputation of competence in his field. To hire a newly trained person or a trainee is, at the least, foolhardy. When you hire a consultant--as contrasted to using someone working for someone else--you can make demands for real help. If you, as the teacher, need help in understanding a child's special problem the consultant is available. If a parent needs a conference or a brief series of meetings to cope with a pressing emotional problem in a child, the consultant could do that too. On the basis of having obtained positive help when he needed it a parent may then be enabled to wait for long term treatment in one of the agencies or clinics, or the short term help may be sufficient. Some will state that since the time of a Consultant is limited it is better to have the Consultant help the teacher help parents. I disagree for several reasons. The teacher has a big enough job in teaching the children and working with parents utilizing the usual teacher-parent conference. It seems too much to expect the teacher to also learn further skills in the area of helping the parents develop awareness of the emotional problems of the child. If the consultant assumes this responsibility the teacher may sometime sit in on these consultations contributing invaluably from her knowledge of the child in the classroom while the consultant can tie this into dynamics of the family. The Consultant could also conduct regular parent discussion groups focused on emotional and physiological growth problems of children thus providing the basis for a trusting relationship with parents which would help the parents accept the need for treatment of emotional problems when this is indicated.

The Ford Foundation has provided a nursery school program in the East Oakland area and, as a Consultant with this very enthusiastic parent group and director (Mrs. Betty McFarland), I hope we can develop some of the new models of consultation such as I have mentioned. The availability of a mental health team consisting of the teacher, school administrator, and the Consultant would allow for several alternatives to problems considered by the team, such as 1) the teacher may see the parents for a conference concerning the child's learning or social problems; 2) the Consultant may see the parents; 3) the teacher and the Consultant may see the parents together. Such a team approach focuses on process rather than on goal and increases maximum participation of the parent since the parents' involvement and wishes determine the choice of alternatives to follow.

I would hope that we might begin to consider the value of allocating funds from the poverty programs to contract, say for half the time of a staff member in a guidance clinic or a family agency to pick up referrals from HEAD START programs. Since the administration of a guidance program is a costly one, it would be efficient to tune in on existing resources rather than establish new ones--but tuning in would require payment for the staff person's time to insure that HEAD START gets the service it needs.

There is yet another way to bring the experienced psychotherapist in direct contact with the poor, to the enrichment of each, by appealing to well-established practitioners through their professional organizations to associate with a clinic or agency and donate a few hours a week to the direct treatment of the poor family. These people volunteer time for innumerable other duties and there is great prestige attached to such a volunteer status. For some professional people this approach would be a welcome substitute for protest marching. For the poor family, having contact with a competent consultant psychotherapist when he needs it and when it is administered in a way that he can use it, means that he is getting the same service as the person who can afford a private therapist.

We need to acknowledge that the teacher will also have emotional problems, some of which may be reactive to the task of teaching and working with deprived children and their families. These will be normal emotional problems in relation to stress in the job. But as normal as she may be, a teacher may need someone in the school setting available for consultation with her own problems. Some of the emotional problems in a teacher may spring from personal conflict which the stress on the job merely activates. In this case the school administration should not only encourage the teacher to obtain personal psychotherapy at her own expense, but grant time off when possible for the interviews or insure that the teachers' health insurances cover some portion of the fee for the treatment of emotional problems. A consultant can also conduct therapeutically oriented discussion groups for teachers.

The emotional problems of the teachers in the HEAD START programs are enormous. Some of their problems may be viewed as the normal reactions to the stress, and it is stressful, to the stress of working with impoverished children and their families. Some of the problems will be reactions to the situation, however; the job in HEAD START will activate chronic or acute personality problems which will have nothing to do with the children. But if ignored they will interfere with forming relationships with children and their families. Psychotherapists face a similar need to seek professional help. I make a strong recommendation that you consider the ways in which you can develop a team composed of teacher or teachers, and a consulting psychotherapist. The teacher would go to the consultant, whose time would be paid for by the program, to discuss her own frustration, anger, or the impulse to categorize children and their parents. The teacher would use consultation, not therapy, but if the teacher wanted therapy, this should be obtained on her own time and with her own payment of the fee, but the teacher would use consultation on a highly limited basis in the school setting once or twice perhaps around a given problem or help with problems which might come up in her as she works with her children and their families. I am suggesting that we allow the teacher to be as human as anyone else and provide an acceptable channel or structure for dealing with emotional problems that come up while doing the job. The teacher often is faced with a request for help from a parent which he might also discuss with the consultant. I believe that such a consultant-teacher contact ought to be confidential. The consultant should not come from the traditional school guidance services or even from agencies because these agencies have to be responsible to agencies or to some structures which have been identified with such agencies. If you hired a consultant you can demand that the consultant meet your needs. A professional person available for such consultation or seminars ought to be an experienced and flexible person beyond the need to use technical language and one who can communicate simply about feelings and ways of struggling with feelings (those feelings that lead to problems in establishing relationships!).

In my mind the essence of the war on poverty is the need to prepare a child to form meaningful trusting relationships. If he can do this with you, as his teacher, it is going to be easier for him to develop to his fullest capacity. You won't be able to relate to the child in a healthy way all the time; parents don't relate to their children in a healthy way all the time. But when you need professional consultation there ought to be someone available to you. When families need help with emotional problems interfering with a child's learning, it would be equally desirable to have a consultant available to them both for immediate relief and to bridge the period required for referral to a community resource. I think we have to pay as much attention to our problems as helpers as to the problems of the poor. This too is part of the war on impoverishment in relationships. This is the war on the impoverishment of the human condition. There is no question of whether we win, the question instead is only when and how.

THE ROLE OF THE FATHER

Mr. Gareth Hill, Psychiatric Social Worker
Family Guidance Clinic
Children's Hospital of the East Bay, Oakland

My primary task here this morning, as Mrs. Thompson said, is to talk about fathers as they function in the lives of their children and families and as they may participate in the HEAD START setting. An important reason for including fathers as a focus of concern, beyond the vital part that they play in the development of their children, is that, in general, they tend to be a most neglected group. For instance, the psychological literature is meager in its coverage of the father-child relationship, while it abounds in studies of the mother-child relationship. What's more, the majority of studies involving consideration of the father-child relationship derive their data from mothers' reports of fathers' activities and involvement with their children, and those reports, in the experience of we who work with families, are notoriously distorted. Also, mothers and fathers tend to differ widely in their perceptions of their children's psychological needs and behavior, and both points of view need to be considered if we are to understand the workings of the family. In reviewing the literature, one is forced to conclude that in Western culture the family is clearly mother-centered. Much of the current literature minimizes the significance of any psychological response of fatherliness in men, whereas it is assumed that women have deep psychological roots of motherliness. Instead of being evaluated in terms of fatherliness, fathers tend to be evaluated in terms of the criterion good provider. A secondary criterion seems to be providing a masculine model with which the male child can identify. This is, of course, extremely important as we all know, but it is probably no less important that the female child develop a healthy and integrated image of men, particularly if she is to grow up with a capacity to participate in forming a family of her own in which her husband can assume his rightful role and responsibility as father.

That fathers tend to be a neglected group is especially true when we address ourselves to the low-income family in that one of the most common stereotypes of the low-income family, particularly the Negro family, is that it is fatherless. Although it is agreed that fatherless homes are far more frequent among Negroes than among Whites, the incidence of fatherless families in both groups goes up directly as incomes go down. The evidence is that this is no more true for Negro families than White families, in contrast to the popular stereotypes. It is interesting to note that the rate at which fathers have deserted their families has been virtually stable for the past twenty years. The sad fact that there are more fatherless families among Negroes than Whites is the direct result of poverty stricken describing proportionately greater numbers of Negroes. Aside from the Negro stereotype, a factor contributing to our image of the poor family as fatherless has been the tendency to identify the impoverished as largely made up of those on the old Aid to Needy Children welfare rolls. The new program, AFDC, including the unemployed or incapacitated father, tends to shift this view toward reality. For of all the families in the low-income group, only about one-third are fatherless, and although this is lamentably high proportion, there are a great many fathers around in the group that HEAD START hopes to reach. Because of the conditions of poverty and their regressive effects upon the fathering role, the lower-class family tends to be more mother-centered and mother-based than is true in the middle-class family on which most of the psychological literature is focused. I would hope that HEAD START could use some of its resources to compensate the mother-based tendency to leave fathers out. And I'm particularly delighted to see at least a few men in the group of teachers here today.

Fatherhood, as a social institution, is a relatively recent innovation of the human species. Motherhood in its basic feeding, caring, succorant, rearing aspect has been relatively unchanged in the roughly two million years of the human species. But the psychology of fatherhood is probably not more then six thousand years old, and, unlike motherhood, has been relatively bound to cultural variation and evolution. The development of fatherhood has paralleled the development of consciousness in the human species and in its gradual mastery of nature and the development of law and order. Motherhood, on the other hand, is rooted in nature and the earth and is utterly subject to its cycles of fertility and harvest, and in its primitive aspect, is a powerful force for the maintenance of a cyclical life of unconsciousness whose only goal is the status quo. Evidence of the relative innovation of the concept of paternity--let alone fatherhood--can be found in the fact that among some primitive people of today no conceptual connection has yet been made between the act of sexual intercourse and conception, conception being explained in terms of contact on the part of the mother with a totem tree or animal. In the long ages when men were utterly bound to the Great Mother Nature herself they were merely drones planting the seed to reproduce themselves and living or dying utterly at the caprice of mother nature who was the only provider. It was the original act of heroism when man broke from this cycle and began to master and harness nature, providing work for himself and thereby becoming the provider. And since then, in the mainstream of cultural evolution, men have found their primary role in the provision of the materials of life through work. First, man provided for the social group as a group and then, with the development of fatherhood, he provided for the family group. If we look at this historical picture, we see that provision for his individual family is the most recently developed basic role of men. Hence, we would expect that role to be most vulnerable in times of great stress when regression is naturally expected to occur, especially in our own culture in which the nuclear family has come to its highest development.

In the sub-culture of the socially disadvantaged, as Dr. Webster presented it to us on Sunday evening, we can find extreme analogies to the historical material I have presented. It is widely agreed that lower-class social organization is especially mother-centered. The natural environment of the lower-class male is an especially hostile one in which few opportunities for mastery of his situation are to be found. But the cycle of life goes on. The women continue to have babies; the daily needs for food and shelter continue to present themselves. The natural tendency rooted in the whole human condition is to look to the mother for stability. She tends to look upon the father of her children in much the same maternalistic terms she does the children themselves. He cannot master his basic role as provider and integrate his sense of useful autonomy and tends to slip into the company of his peers who are also drones planting the seed but having little further usefulness. He looks to other definitions of masculinity based upon pre-adolescent values of his peer group, the apex of which is, perhaps, symbolized in our society by Playboy Magazine. As Dr. Webster pointed out, the values developed are for immediate gratification and aspirations for surface manifestations such as clothing and cars, while the deeper values of relationship to wives and children and connectedness to a meaningful place in the scheme of things are neglected and lost. The historical roots of this dilemma are particularly poignant, I think, for the impoverished Negro male who until relatively recently had the role of a kid of stud to reproduce more slaves for the white plantation owner and who was otherwise relegated to a role of subservience to the earth and the fields and the harvest. Once the father falls from the position of provider, he is subject to the laws of the older order in which his family is provided for by the larger group--in our time the welfare state--and the mother becomes the institutionalized center of the family. The larger society reflects this more regressive view and writes its welfare codes and its laws of domestic relations in ways which largely disenfranchise the father if he cannot provide. Hence, his role in the psychological life of his children is legislated against and largely forgotten. The purpose of my presenting this material is to help us to bring into focus the enormously powerful forces in the history of the human condition operating to make the role of fatherhood a difficult one to integrate into our perception of family life if he is not adequately able to provide for his family. Again it would be my hope that the mothers and the teachers working together in HEAD START would not fall into this tendency.

In the context of this background material we can, of course, immediately appreciate the plight of the average father of the HEAD START child who in the subculture of poverty has fallen from the role of adequate provider (if indeed he had ever attained it) and whose whole social milieu militates against his ever gaining this basic masculine identification. He loses status and respect in his own eyes and in the eyes of others, including his family. His inability to provide drains him of the will to struggle with continuing and insuperable family responsibilities, and the incentive to desertion becomes very great indeed. We can, I am sure, easily agree that in the long run what is most needed for the fathers of low-income families is jobs with stability, status, future, and fair wages. Clearly, primary attention must be given to this basic economic and social foundation for healthy family life, but in the immediate acute crisis facing families suffering the crush of poverty but still intact, hopefully, HEAD START can participate in educating the fathers to their vital role in the emotional development of their children which transcends the issue of economic provision. Also, mothers of children need to have men around, for they are most successful as mothers when they can see themselves as worthwhile individuals with a life of value and meaning outside of the mothering role. Men play the vital part in supporting this aspect of the feminine psychology in their roles as husbands, and this fact is commonly neglected by women who become over-identified with the mothering role. The HEAD START teacher needs, in my opinion, to be aware of this tendency.

As Mrs. Thompson has presented in her paper, one of the important roles of the HEAD START teacher will be to help the parent who has identified his child as having unusual developmental problems or emotional disturbance. An important manifestation of the historical picture of fatherhood I have presented can be found in understanding the problems of disturbed children and our efforts to help them. In our work as psychotherapists with the families of disturbed or developmentally retarded children, the most common prevailing picture is one in which the mother can be found at the center of the family configuration, often standing between the child and his father. Under stress, women who are uncertain or insecure about themselves as individuals often take refuge in the more basic instinctual role of mother. When motherhood is used as a refuge, however, it tends to manifest a negative aspect which again disenfranchises the father, tending to see him as inadequate or as a threat to the welfare of the child and which tends to interfere with the child's development of an autonomous personality. In this self-protective use of the mother role, she imagines that she does not need her husband to help her with the children or that he is inadequate to do so. With such pathological families, the father usually falls in with the mother's attitude by feeling inadequate himself and participates by withdrawal or destructive behavior which perpetuates the mother's view of him. When the parents are largely unconscious of this kind of pattern between themselves, the child is apt to have a behavioral symptom such as learning problems or impulsive, uncontrolled behavior. And as we have seen, the whole subculture of poverty tends to enhance such disturbed family relations. In such cases, because of the family's modes of interaction, it is the mother who stresses concern about the child and seeks help, often acting as if the husband either can't or won't participate. It is at such times that the helping or referring person needs to remember the father and find creative ways of compensating the negative forces in both parents which tend to keep him out of taking active responsibility for the child. It is here that the teacher can begin to help the mother accept that she needs the participation of her husband and to support her in bringing him into active participation in any planning that is done on the child's behalf. It is our experience that unless the father is involved at this crucial point the well-meant efforts to help the mother and child will almost inevitably fail.

INDIVIDUAL DIFFERENCES

Dr. Lois Meeks Stoltz
Professor Emeritus
Department of Psychology, Stanford University

During my lifetime, I have been in three upheavals for the welfare of young children. The first was during the depression when we started nursery schools all over the United States under Mr. Harry Hopkins of the Federal Emergency Relief Administration. We did it, not for young children, we did it because it gave an opportunity to employ adults. At that time efforts were being made to provide work programs for adults. We started this program to employ teachers, janitors, and cooks. Incidentally, we did a great deal of good for the children. The second upheaval came during the last World War. All of a sudden we were interested in having women working in industry or working in communities taking up the jobs that men had left when they went to war. And so again, because we were interested in getting adults to work, we did a job for children. We did some very good things for children during the war. One of the most outstanding was done by the Kaiser Company in Portland, Oregon where they built child care centers under the Maritime Commission. Today, again, we have started on an upheaval without enough teachers, without enough people ready to do the job. But this time we are more interested in children. This time we are trying to do what was said a long time ago: to get children past their parents into the life that shall be free. We are trying to make not only a HEAD START but a head jump. A jump over the handicaps of their family life of poverty, of their family life where English is not well spoken, of their family life in which children have learned little of the intellectual tasks which middle-class children learn at four years of age. We are doing this for children so they will be better than their parents, and so that they will have more opportunity. This is a more difficult task than it was to get jobs for people during the depression, to get women to work in war industries during the war. Here we are saying that we want to make children better than they would be if they just had their home life and their usual school life. Whether we can do this or not remains to be seen. Whether the things we will do will really carry over and be more than just a little drop in the bucket remains to be seen. At watsonville yesterday, I learned for the first time of a follow-up program. The children who were in the HEAD START program last year are coming back for another summer. This is good because children need more than three months to make up for the four or five years they have spent under disadvantaged conditions. It takes more than just three months work, and you might as well face this because you will be discouraged at times with some of your children, although at times you will be very excited and encouraged by many of your experiences. The point is that this is a beginning and it is hoped some day that we can face as a society, the fact that children do learn before five years of age, and it is the responsibility of the community to have something to say about what kind of learning takes place. We hope that there will be schools for four year olds and three year olds, and consultation centers for mothers, and play places for two year olds. Other societies have had such programs for a long time. For instance in Russia and we are just beginning to see the importance of these early years. May you push that ahead in your communities.

Now Mrs. Lewis asked me to talk to you today about individual differences. I think individual differences among the children that you will have in your group is just as important as their likenesses and their similarities. We have had a poor past history. We have had whole series of books and pamphlets that have been written during the last 25 years which have told you what three year olds are like, and what four year olds are like, and what 5 year olds are like. Now if you can forget about so-called general characteristics, you will have a "Head Start" when you meet your group next week because these children are not like a stereotype. One of the things that you must learn is that your job is to learn what these children are like through observation of them in their behavior. These differences are important not to get rid of, not so you can make every one alike, but differences so that you can build on them. I'm sure that there is not one of you who would like to be like the person that sits right next to you, I don't care who it is. You like yourself, I hope. You won't be a good teacher if you don't like yourself. There are things that you like about yourself and you are different. As I look around, I don't see any two of you that look alike, to me. Each one of you looks different, and this is the outward evidence of something that is much more important: the differences within you. You have differences in your values, you have differences in your thought processes, and you have differences in your emotions. If you have ever heard two women talk together you hear one of them say,"What makes me so mad is X,Y,Z," and the other one says, "well, that doesn't bother me,but boy, do I hate A,B,C." They both get angry, but they get angry at different events. This is what your children are like. They are different. The most important part of your program will be based on the realization that children are different.

The purpose of HEAD START, as I understand it, is to improve a child's ability to cope with and to profit by the experiences he will have in school. There are certain important personal resources that each child must have if he is going to cope with these things. One of them is self-confidence. The other is self-esteem, they go together. To like himself. "I likes myself as I is," one said. That is good, that is good. It doesn't mean you cannot improve but it means you don't reject yourself. Each child must come to realize that he likes himself. The third personal resource is the feeling of worth. That has to do with what other people think of you. Unless you believe other people think you are worth something, you won't think much of yourself because in our culture, what you think of yourself comes from the response of other people to you. I remember a case study which was done of a boy who was a delinquent in Chicago and the boy wrote in his autobiography, "My mom said I wasn't any good, my dad said I was no good, my teacher said I was no good, so I guess I ain't no good." It is extremely important that you believe that other people think you are some good, because this affects your own self-esteem.

We must be wary not to set high aspirations for these children. Their aspirations must be kept closely related to their ability to achieve. Unless you keep their goals near enough so that they really accomplish them, they will be discouraged and therefore they will have low self-esteem. If you want anybody to think that he is no good just let him fail, just let him fail often enough, and he is sure. The greatest way of building a zest for learning is to succeed. The way to kill wanting to learn is to fail. From the littlest child to the adult, nothing succeeds the way that success does. If you want them to like learning you fix the situation so that these children can learn. Not so that they have to be punished for not learning, not so that they have to be isolated for not learning, not so that they have their names on the board (Johnny was naughty today): these are punishments, and research has shown that punishment hurts learning. It inhibits it, and it will inhibit behavior, but it doesn't facilitate learning. You can only build this self-esteem by giving consideration to the individual child. If a child builds self-esteem, if he thinks he's pretty good because you think he is pretty good he will be more likely to realize his own potential.

Now what do we mean by this individuality? I'm not going to spend long on this. But the most commonly accepted point of view is that most people are normal and there are a few way out on the edge, the far edge, and these people are different. Now the real scientific facts deny this. Practically every human being is a deviant. He is different in some respects. An interesting study has been made of the biochemical differences of the individuality of people.) Some deviations of course are more marked than others. We have people who are extremely tall, 6'4" is unusually tall, but we don't say it is abnormal, we don't say there is anything wrong with these people. This is not out of the range of normality, it is a difference among people. It is the same with intellectual characteristics. I know a math teacher, for instance, who is an excellent teacher, and keeps very good records, but she can't keep her own bank account straight to save her life. This is not usual, most people who are good in mathematics can handle all these things that have to do with figures fairly well but she is just different.

If you measure the height of 200 boys who are fifteen years of age you will find some of them very tall, some of them very short, but most of them will be in the middle range. Such a distribution has been found to be true of most measures of human beings. In your HEAD START program children will come from the lower end of the distribution in only one measure: the income of their families. These have been chosen for the HEAD START program because low income involves many conditions that have to do with the learning of children. However if we could get adequate measures of the development of each child we probably would find that although they do not cover the whole range they will be spread out and not all will be grouped at the lower end. In emotional development these children are going to be distributed also with some hostile and aggressive, some friendly and sympathetic, some overly passive. But most of them will have a middle range, they get mad some times, which is good and healthy, but for the most part they have learned how to discipline themselves and can control it pretty well. Even though they may not like what you say, they will smile at you. Thus studies of mental ability, of language, of reading, of emotional stability have found that these children differ. This is what I want you to look for, look for the differences.

The average of children from disadvantaged and middle-class children will differ but you must always remember that any average means that 50% of the children are better than average and 50% are worse than that average. These averages aren't worth anything for a teacher. Because the teacher must teach all children, and 50% are going to be better than the average and 50% are going to be worse. So if you, no matter which ones you deal with, if you are going to deal with them right, you won't be dealing with the average child. I hope that you won't talk about the average child, I hope you won't think about the average child, that you will be interested in differences in children.

Now I want to talk with you about the ways in which children differ. I call these cues to look for. One of the ways in which they will differ is their rate of development. Built into the human organism, is a "rate clock", it's as if we had lots of time clocks in us. Some people's time clocks go off much more rapidly than other people's time clocks. On the average, girls develop more rapidly than boys. So you would expect in general that your girls are going to be further along in development than boys. But remember, even though this is the average, there are some girls that are slower than some boys, so your going to have to look for this. There are individual differences within each sex so you can't always be sure you have to observe. It gives you a cue to look for.

Now, chronological age, how old a child is tells you something about his development but not all--because a boy may be five years and six months, and a girl may be five years and six months, but the girl has already developed more than the boy. He will catch up with her but he may be thirteen years old before he does catch up to her. He may get to the same place and go further, but he does it at a slower rate of development. There was an interesting study made of children in the first six grades. All the grades that a group of children had been given from the first grade to the sixth grade were divided into four piles. The grades for girls and for boys were separated. Then both boys and girls were separated according to their age at entrance into the first grade into two groups--older and younger. In this way there were four groups: older girls, younger girls, older boys, and younger boys. When their grades were examined for the six years, the older girls got the best grades, the younger girls the next best. Very close to the younger girls but lower than them, came the older boys, and lowest of all, the younger boys. And between those older girls and those younger boys, all in the same class for six years there was a statistical difference which was statistically significant. The girls excelled not because they were smarter, not because their mothers had done more for them, but because they happened to have time clocks within them that made them develop early. I think that every one of you ought to know the age of each one of the children that comes to you, not in years but in months. A child may come to you at five years and one month, another may be five years and eleven months. This may make a great deal of difference. Find this out. Find it out the first week. Be sure you know where these children stand. Chronological age is a rough method to estimate development but it is the quickest one for you to use. Although in general the boys may do less well than the firls in the HEAD START programs, by the time they are mature at eighteen they may surpass the girls, because they have high motivation for learning.

Therefore in HEAD START the people that are likely to need the most help are the older boys, the younger boys, and the younger girls. They need the most guidance. Here is where your assistants can be of help: to read a story to a small group; to help a boy learn to work a puzzle.

Most studies of children's language ability have shown that girls on the average are better in language than boys--not all girls of course, but the average. It may be more because they identify with their mothers, plus the fact of their earlier development. This means that you must take care not to let the little girls in your room do all the talking. If a little boy tells a story perhaps you should let him tell it to your assistants so that Dolores will not interrupt him or take the story out of his mouth leaving him standing there. In addition you must not let the teacher have all the practice in talking. In some studies, 80% to 85% of the language in the classroom was found to be done by the teacher. She gets a lot of practice in talking--but these children need practice in talking. The less developed children especially new practice. They may be taken off by themselves in small groups to listen to or to tell stories. Here is the opportunity to use your assistants.

I visited a HEAD START program last year where two very able assistants were standing just smiling while the teacher did all the talking and the children sat quietly and listened to her. I don't mind assistants smiling but I want them to be doing something with children. I want them to be active: reading stories, working with puzzles, sitting beside a child while he works with blocks. Most teachers don't know how to use assistants, because they are accustomed to being the whole show and doing everything themselves. Some use assistants to do housework, but won't use them for active work in teaching. This is a new role to learn. How to delegate authority, how to see that children get many contacts with different individuals instead of a few contacts with one.

It is often said that boys are better in science and mathematics, but we find that some girls are interested in science and mathematics. Eleanor Maccoby pointed out in a recent paper that "tomboy" girls who had been allowed to be active, climb trees, and investigate are just as good in mathematics as boys are. She believes that being good in mathematics has to do with feeling freedom to explore and not rigidly being restricted.

In our culture certain things are considered appropriate for little girls to do and certain things appropriate for little boys to do. Such ideas limit the experiences of both sexes. Two of my students made a brief observation in an elementary school of the cultural role teachers assign to children. In general teachers are quite conservative. The women teachers like athletic, vigorous, outgoing boys. The men teachers like pretty, passive little girls. These are cultural stereotypes. All boys aren't vigorous, outgoing. Some are artistic and sensetive, and somebody ought to like those quiet, artistic, sensetive boys. Somebody ought to like the tomboyish girls: girls who like to climb, or organize, to direct, who are not passive, who do not look to the great male to do all the important things. Teachers should try to like children as they are and give them an opportunity to practice many different kinds of roles so they may feel more competent whatever roles in life they have to carry. Because girls are more rapid developers than boys, and have an additional advantage in language, they take the most important roles among young children. If you go to a kindergarten celebration for the PTA, the girls take the leadership in the program. Now it seems to me that leadership roles in a group should be used to teach children not to use children who already know. Teachers use the children whose mothers have already taught them how to take responsibility to send a note, to fix the books on the shelf, to clean up and so forth. The little boy who has had no chance to learn responsibility is the one who needs help to learn. Your teaching aide helps him take the note to the principal, or go down to the Cook with a note about lunch. Use these as experiences for learning, as a basis for building self-esteem.

To be able to take various levels of responsibility must be learned. Teachers have many opportunities to help children acquire this valuable characteristic. Case studies have shown that even the most hopeless vagrant can learn if he has sympathetic understanding and an opportunity for practice.

WHAT MAKES A GOOD NURSERY SCHOOL

Mary Lewis, Director of Training Session
Director, Parents Nursery School, Palo Alto
Instructor, Elementary Education
San Francisco State College

Last week when I was getting the program ready, I began to think about what kind of a tricky title I could give to topics seven and eight of the educational program and even last week, I wasn't up to my usual standard of tricky titles, and whatever is in your blue-covered program is all I could do. Now, I hope that what I have to say will cover some of the points about the educational programs in some of the child development centers.

Tonight the pressures of the week have taken a certain toll and all that I can do for you is to tell you where I, as an individual, stand on nursery school programs and hope that you can use my words as a starting point for your own philosophy of a child development center. There aren't any crutches in this business. What I have to say fits me and it won't fit you. There is nothing that we can do for you this week which will really work for you. You are going to have to think this through yourself, and you are going to have to remember some of the things that you have heard during the week. I hope you do. I have violated everything that I stand for by just ramming depth speakers and skill sessions and reading materials at you. I know better. I know that people need time to think the quiet thoughts and to just do nothing and just sit but I haven't done that, I haven't allowed one moment just to sit, and I apologize. I have no excuse except that the material that has come to you has been very exciting to me and to the other people who have planned this program, and there has been nothing that I could possibly leave out. Now I will say before I begin this evening that I was in the same position that you are. I would like to say this again, that I was in the same position that you are tonight at this time last year. And I know exactly what it feels like to be sitting here listening to somebody else talk, to be carrying around that bag of free reading materials. I feel for you but now I'm up here giving you the benefit of my experience.

Since last summer, I have changed jobs and I am no longer a nursery school teacher; I am no longer a nursery school teacher at the very moment that the whole world has suddenly discovered that people who have been working with young children had the answer all along. The answers about working with young children are the answers for working with anybody. Nursery school teachers have been saying this for a hundred years. I has only been the last two-three years that suddenly we've got to start with the twos and the threes and if the best we can do is the fours, then let's take the fours and the fives because it's too late in the teenage years; it is too late with the young adults; it's too late with the young family. We've got to get them before formal schooling. Now I'm sure that all of you and all of us up here could have said that and saved many millions of dollars but we weren't asked until a few years ago. But I have reached the point where I am very concerned that there aren't enough concerned nursery school teachers to go around. I'm doing what I can at the college to help people see how exciting it is to work with young children and their parents.

I'd like to tell you a little bit about myself before I launch forth because I think you need to see me in my frame of reference. Some of you have been to see my nursery school where I have been working for the last fifteen years. Before I was working at that school I worked here in San Francisco, in Sunnydale by the Cow Palace in the Housing Project right after the war. It was there that I began. It was there that I began as a mother of a four-year-old, and when I arrived at that nursery school the tuition had just gone up to a $1.50 fee a month and people apologized to me because I got there just too late. The school where I am now the Director charges $21.50 a month, and it is a co-op, and it is the same kind of program. The people I have now are mostly upper middle class parents. They work hard and they do all kinds of menial labor; they do all kinds of paper work--that's why I have been so poor at the job I have had this week! I'm not used to it (they do the dirty work) and all I do is walk in and talk to their four year olds, interact with their four year olds, and have a great time with their four year olds. And I also have a great time with them because I don't do anything differently with their four year olds than I do with them. I treat the adults I work with the same as I treat the four year olds and I'd like to pass this on to you as a little rule of thumb which you might try out. There is no difference between children and adults. This week I have been somewhat perturbed as I have heard some snatches of speeches and discussions as people pass me in the hall about these kids, these parents vs. those kids, and those parents, and I would like you to know that I see them as kids and I see them as parents; I don't see much difference. I don't see much difference between the parents I have been working with for the past fifteen years who are very anxious to see their children succeed in life and the parents I have worked with in the HEAD START program who are just as anxious for their children to succeed in life.

And I don't think I did things terribly different, yes, I did too--I went through the week's orientation program and I listened to all the words of wisdom about the poor and how they were neglected, and I forgot one cardinal lesson which was: that a good nursery school teacher looks at the children in front of her and goes from there. I went home a year ago after that week and I said to myself, "Those children don't know their names; they don't know colors; they don't know a circle from a triangle--I must do something about it." So I thought to myself, "I'll start with red." And I mixed red paint and I put out as many pictures of red items that I could find, and I put out construction paper with the paste, and I put out a whole lot of things red. I really worked hard after I left the orientation session. And I had some volunteers in the background who were mixing the paint for the rest of the eight weeks and inadvertently, in the kitchen window of my school, they had a roll of plastic jars of paint. They had orange, green, blue, yellow, violet, black, white--all on the window sill. But out on the easel, out on the porch I had RED paint, at every easel. And one child looked up at me and he said, "Teacher, why can't I have some of that yellow, and blue, and green and I'd like a little white paint, and--why can't we have that out here today teacher?" So with that, I threw away all the facts that I had picked up about those children and remembered that my job was to look at the children in front of me and go on from there. They knew their colors; they knew their names; they knew a lot of things. I learned a lot from them.

And as I told you before, the best thing that ever happened to me was to be in a HEAD START program--I hope that you will be saying this eight weeks from now. I would like to say, on the basis of what I have just said, that as far as the government goes, and the Washington HEAD START office goes, they also see that there is no one answer to a HEAD START Child Development Center; depending on where you are, and on what kind of people you have, there can be a wide range of activities in the curriculum. The curriculum or the program will depend upon the kind of people to be served. There are tremendous individual and group differences. Now let me go on from there.

There are two extremes which I hope that you will avoid. An extreme that I am going to tell you about because it is exemplified in me, one: I hope that you will avoid the freedom-oriented type of child development center where the staff gets together and says, "They have had a hard life, let's let them get together, let's let them live; let's not put any brakes on any kinds of activity." This is versus the other kind of program where the parents say, "We are going to have an absolute learning experience. They are going to learn through these eight weeks and we are going to give them typewriters, and we are going to give them work-books, and we're going to put them in rows and they are going to learn." In the middle there is the happy medium.

Now I am going to make a surprising statement here to you. The people who went to my nursery school today know something about me, for they saw a nursery school that had a lot of space and was kind of broken-down inside, had a lot of bright colors, and looks well-worn, but it looks quite disorganized. But of course you all know that already, you have passed room 140 all this week! But what you don't know is that I am a product of the Montessori School. I am one of those few living examples of forty years ago in a Montessori five and six year old program, and in one of the classes that Marian alluded to, one of my students did a term project on Madame Montessori and her educational philosophy. As part of this she brought a demonstration of the equipment used in the ideal Montessori school. And when I saw that equipment, and I had some of that equipment, at my nursery school in Palo Alto, a flood of memories came back to me because I had a very happy time with that equipment and I have had a very happy time visiting the Montessori school at the Convent of Notre Dame in the last year, with my students, but I don't run that kind of nursery school. But I am happy that someone does because there are some children who do better there than they would do with me and there are some children who do better with me than they would at the Convent of Notre Dame. There is a wide range of preschool experience that can be given to young children, provided that certain goals are met and these you need to keep in mind, no matter what kind of program you have.

First of all, children need an atmosphere of warmth. They need warm, close, human contact. They need the feeling that adults, both parents and teachers, like them and are interested in them.

Now I would like to stop here because I would like to make another point. As Director of this Orientation Week Session, I had some command decisions at my disposal, and I took great pleasure in making them. One of them was: regardless of who the hundred and fifty people expected at San Francisco State College were, they were going to be mixed randomly in the seminar groups. I do not believe in separating administrators, teachers, aides, parents; nor do I believe in separating the X,Y,Z society from the A,B,C school system. I believe that we can learn from each other and therefore we should be all together in a group. However, I do not see that to be successful this week I have to convince you that you should join my school of thought. All I am trying to do is to get you to listen! --to understand that there are many schools of thought, and we all deserve equal time.

To go on, I believe children need an atmosphere where the adults enjoy them and feel ready to feel responsible for them,where the adults are able to step in and say, "No, you can't do that any more, I won't let you". One where the adults can protect them from themselves when that occasion arises.

I think that children enjoy an atmosphere where they can have full and free expression for their physical energies which are so rampant in childhood--where there is space to run and height to climb; where the arrangement of equipment is suitable for their capacity. Now after I made this note, I realized that I am in favor of the wide open spaces. And I was well aware that some people are not going to have the wide open spaces. But I'm sorry, for it puts much more of a load on a teacher to be creative, but you can get around it, by being creative with the concrete sidewalks, the sewers, the city streets. There are all kinds of things to be seen, if your eyes are open and if you ask the right questions.

Children need an atmosphere where consistent and realistic limits are set. Now when I say that I mean for the child, not for the adults. I'm not talking about an atmosphere where the children are kept quiet, because that is the way the teacher likes it. I'm talking about an atmosphere which is consistent and realistic in terms of limits for five year olds, where he can feel the confidence of familiarity and power in his own world. Children need an opportunity to make their own discovery. Our goal, I think, or my goal, I should say, for a good program is not that the child knowsthe right answers, but that he knows how to ask the right questions. A program in which he's had enough people listening to him and waiting for him to put his questions into words, helping him with words or just waiting for him, so that he knows that he has within him what it takes to ask the right questions. By asking the right questions children learn connections--what belongs with what, what comes from what. They learn processes--how paints are mixed, how seeds grow, how boats float. They learn people--how to fight, how not to fight, how to live together. The facts they learn matter only a little. What matters most is that they will be left with newer and broader feelings about themselves, feelings of power and strength on which to construct that basic feeling referred to earlier this week, namely, that the world is theirs to understand, to influence, and to re-create. Now for the last few moments I have been quoting Barbara Bieber from a pamphlet she wrote in 1939. The world is still theirs. And some of you were the kids that she was talking about, and I guess you goofed a little bit, because it's still to be had, it's still waiting to be taken.

In going on about a good program, my number one conviction is that to have a good program you have to have a good teacher. And I would like to quote from Keith Osborne of Merrill-Palmer. Keith said: "That if the teacher knows how to achieve trust that she can allow a child to be autonomus and to show some initiative, the curriculum will take care of itself." And I believe it wholeheartedly. I think that the good teacher has to have some kind of instinctive understanding. She has to be able to treat all 15 children in the child development program differently. They are not just one glob of children. They're not all alike. They are 15 different individuals. A good teacher must have good training. Either in-service training or pre-service training. I have no feelings that you have to have a Master's Degree in Child Development in order to be a good preschool teacher. Nor do I believe that you have to just come up out of the earth and love all children in order to be a good preschool teacher. You have to have self-understanding. You have to know your own shortcomings. A good teacher has to have the ability to enable others to grow. And here I am reminded of the old saying by Lao-Tsu to the effect that a good leader is one who when the work is done has allowed the people to say "we did it ourselves". I paraphrased that badly. It's a marvelous saying for this is the good teacher, the good leader. Now in addition to all of these good qualities, a good teacher has to have the support of the person above her. Because she can't do it alone. She has to know that her administrator values flexibility and has faith in her. And when I am talking about a teacher, I want you to know that I am talking about all the adults in the child development center, regardless of who is the Head Teacher, who is the Assistant Teacher, who is the Teacher's Aide, and who is the Parent Helper. To me, anyone is in my category of teacher in what I'm saying tonight.

Now the program content, as far as I am concerned, is not an extension of kindergarten, or a watered-down version of elementary school, eight weeks earlier than September. What goes on at a preschool program is for preschool today, not for next year or in the third grade or in junior high school. It is for right now. It is not a program of custodial care. I think in a good program with a good teacher, there is work to be done, there is never a moment when the teacher can just close her eyes and her ears and just take a little rest, when the children are there. To do this, there must be an adequate staff, and earlier this week you have heard various comments about having men in the program. And this made me very happy because when I went to St. Louis in April or May with a group of people planning these orientation weeks in the Western States we were talking about who is available to teach in these orientation programs. Who could all these people be who could be coming to the orientation sessions? And we all talked about the shortage of nursery school teachers, and people who are very devoted to the cause of young children, and I opened my mouth once too often and said, "Well, why don't you consider hiring some men?" And there was dead silence in the room. And I had wondered what I had said, how had I put my foot in my mouth this time? No one moved an eyebrow, no one said a word. And then the leader kindly went on to the next question to be considered. I have smarted under this ever since, until this week. Because you heard and I have heard that there are a lot of unemployed men and boys in the communities where you will be working, and you have also learned how important it is for young children to have a man in their lives. So all you have to do is go out and get somebody to come in and help you. Just to be there. Just to be around. This helps the kids; it helps the men (because it gives them something very worthwhile to do). In a very moving discussion of Project HEAD START in Mississippi, which I heard about six weeks ago, a man was quoted as saying, "I've been out of work for years and for the first time in my life, my teenager could look at me and realize that I was of some worth because I've been going to the HEAD START program in my town every day for the last seven weeks." You can have somebody say that right here if you can get some young boys, teenage boys, some of the men who are unemployed and who have time to give to somebody for something. The children need them.

If you're going to be a good teacher, and if you have absorbed some of the material on child growth and development, for one thing you won't have a child sitting for long periods of time. There will be plenty of group times but they will be short and sweet. You won't be one of the teachers who says, "We've got it all the same so we can regulate it." You can't have it all the same when you have 15 to 20 different children. You won't be lining them up when there are 15 different things the children could be doing. You're going to have to be thinking about 15 different kinds of questions but then you're being paid to work for eight weeks. You won't let a work-book plan your curriculum. You'll take some of the responsibility for thinking what the children in your center need. And above all you won't say "it won't work" until you try it out.

Now if you give some thought between now and the time you start the program in your child development center I think you will reach the same kind of goal that Carl Rogers has reached when he talked about the goal of a self-actualizing person, a person who is creative; who has sensitive openness to his environment; who trusts his own ability to form new relationships within that new environment; who can survive the changes in the environment by making adjustments; who is constructive instead of destructive and who is free from defensiveness. Now all these goals can apply to children as well as to adults. Because the beautiful thing about Project HEAD START is that the adults who take part in it are going to change, and grow, and learn just as much as the children. I would like to read you the words that Carl Rogers has written about this kind of person.

> When we are able to free an individual from defensiveness so that he is open to the wide range of his own needs, as well as the range of environmental and social demands, if his reactions may be trusted to be positive, forward-moving and constructive, we do not need to ask who will socialize him, for one of his own deepest needs is for affiliation with and communication with others. When he is fully himself he cannot help but be realistically socialized. We do not need to ask who will control his aggressive impulses, for when he is open to all his impulses his need to be liked by others, and his tendency to give affection are as strong as his impulses to strike

> out and to seize for himself. He will be aggressive in situations in which aggression is realistically appropriate, but there will be no runaway need for aggression. His total behavior in this and other areas, when he is open to his own experience, is balanced and realistic behavior which is appropriate to the survival and enhancement of a highly social animal.

I would like to reinforce this because I think this requires faith on the part of the teacher. She has to have, he or she, has to have faith that the program will work--that changes are taking place even though they may not be apparent in four weeks, when you will probably be asked to make a mid-way evaluation of how things are going. It may not be apparent in eight weeks, but there will be a change. I think that the kinds of equipment that you have, the amount of expendable supplies you have on hand, the ratio of outdoor to indoor space, is going to vary from Center to Center and is going to be a problem from Center to Center, but I still feel that you are going to make the difference between the good program and a poor program. And if you can go away feeling that you have what it takes within you, you are going to be successful, because you can't fail. You cannot keep children from learning if you are open to them. If you look at them and listen to them and try to provide in the next moment, or the next hour, or the next day what their behavior, their actions, or their words have told or asked you, I do not see how you can fail. Perhaps I am an optimist. Perhaps I seem to be an optimist, but I think I speak from experience in my HEAD START class in 1965 and from my experiences with children in general. It takes concentrated effort as well as lack of concern to spoil something for a healthy child and keep this in mind as you discover you made a mistake or two along the road. It is not going to matter that much as long as you're doing your very best to meet each child's needs.

PRESCHOOL VOLUNTEERS: THAT ADDED TOUCH

Mrs. Adah Marie Miller
Counselling Assistant, Center for International Education
School of Education, University of Southern California, Los Angeles

It is a pleasure to be here with you, and I want to commend you because you are still alive and breathing after this intensive week of training. My subject is Preschool Volunteers, and in thinking of how best to present it to you, I reverted to my newspaper days, and thought of the subject of volunteers in terms of the questions beginning journalists are taught to ask: WHO, WHAT, WHEN, WHERE, HOW and WHY.

Keeping this in mind, we come first to number one question: WHO? Who are the volunteers? They are people who hear about the preschool program, Operation Headstart, the child development center--whatever it is called. This whole movement has a built-in publicity factor. Everyone knows about it, so when you mention HEAD START, this is something familiar to most people. And usually the feeling is favorable. Of all government programs and poverty programs, Operation HEAD START is one that can be most accepted and least criticized. So right away, people know about your work and are predisposed to think kindly of it and of you, even though they may not know you and may not know exactly what it is that you do.

But because of the publicity, you will have people phoning to offer their services. They will ask, "What can I do to help?" And they will say, "I want to do something. I don't know what I can do, but I want to do something to help." What they are telling you is that they think this is worthwhile, and for any number of personal reasons, they want to become involved.

Volunteers are also brought to you by word of mouth advertising. People who are involved tell their friends. And if you have a vivacious and eloquent director like Beatrice Brown who is invited to speak to countless parents' and educators' groups, then you get ten more phone calls from potential volunteers for each talk she makes. So you have all these names coming in. You have all these people who want to do something. Who are they? It is interesting.

We took a count of all the people who volunteered for our preschool training class. Of the 85 who originally signed up we had all ages from 16 to 66--all of them women, except for one lone man. The most prevalent age group was the one of 36 to 45 years. These are women whose children are going to school, have gone to school, have fled the nest, or are poised on the edge of the ledge ready to take off, and these women want something to fill their time. Then there was another large group--the second largest--46 to 55 years. These are the grandmothers or almost grandmothers. The next highest number of volunteers for our program was those aged 26 to 35 years. These are the ones who are involved because they have just been participants in co-op nurseries or who have children in preschool or who simply want to help.

And they bring to you all levels of previous education and training. Some were high school dropouts. But some have done graduate work in college. Some attended rural schools in the South, some were "Army brats", some have studied abroad in private schools and speak six languages. Some have seven children of their own, some have no children. Some have been teachers, others have been camp counselors or involved in church or scout work. That's the WHO of it. You get all kinds of people and all kinds of age groups with all kinds of different experiences, and they call you and want to help.

WHAT. "What?" is the next question. They want to help do what? At one of our training sessions, Dr. Hobart Thomas, chairman of the psychology department of Sonoma State College, posed two questions, and the responses of the volunteers to the first one is relevant to the question of what it is they have in mind to do.

Dr. Thomas asked the class members, "What do you feel you have to gain from this program? Or, in other words, what's in it for me?" Some of the class bristled at the "What's in it for me?" aspect of the question, because they weren't willing to admit that they were there for any other than purely altruistic reasons. They weren't ready to accept the fact that there might be something in it for them--or they didn't want to put it that baldly. But when Dr. Thomas asked them to please search honestly for the reasons why they were there, many interesting comments were made:

> "How do I avoid being a typical white, middle-class, do-gooder with all that stigma attached? How do I really get to know and appreciate all those minority groups?"
>
> "I want a knowledge of preschool children, their needs, etc., for my own personal enrichment."
>
> "To help children and help myself understand other people."
>
> "To try and find ways to help my child."
>
> "I love children and I have always wanted to be a teacher."
>
> "I always try to talk problems over with a person with experience, and that's why I came to the orientation course; doing something one wants to do is very rewarding."
>
> "I have a preschooler, and I hope that I can learn something that will be of benefit to our own family."
>
> "I enjoy children and get great personal satisfaction from working with them."
>
> "I find it comforting to be among people who are trying to be helpful in making this program work and then I personally gain from it."
>
> "Perhaps to help in a small way to atone for the hurt we have inflicted on the disadvantaged group and salve my own conscience."

These are the kinds of comments, and these are the kinds of people who come to you to offer their services. Who and what.

The next question is WHEN? They come to you with their rich and varied backgrounds and experience, with all their needs and all their potential, and they say, "Here I am. When can I start?"

The reaction of most of us is to sigh with relief and shout, "Right now. Yesterday." Because as you well know, there is a tremendous need for as much help as you can get in a preschool situation. But on the other hand, there is danger in turning loose a lot of eager and willing, but unsure, insecure, needful people on a group of little children--and their teachers--who are also eager and willing, but also unsure, insecure, and needful. And at the outset, no one on the preschool staff has the time to take each individual volunteer and give her an individual orientation into the general and specific procedures for your particular situation.

Therefore, it is my considered opinion that an over-all orientation course is called for. And right here, at this point in the discussion, might be the best time to describe to you our "pioneer" course in orientation for preschool volunteers as we developed it to suit our needs at the preschool in Marin City.

First of all, you are lucky if you live in California, because we have here a veritable network of junior colleges almost within the sound of your voice when you lean out the window and holler, "Help!" We had been in contact with Mrs. Cooper and Mrs. Nisbet of Berkeley, who initiated the STEP program for training school volunteers. They were kind and generous enough to share with us their knowledge and insight born of experience, so that we had only to adapt the STEP program to the preschool situation. And because the STEP program utilizes an adult education course offered by a local junior college, we hoped to do the same. Fortunately for us, the Dean of Adult Education at College of Marin, Dr. Roy Mikalson, is a practical as well as perceptive person, so that we had a mirimum of dalay and disappointment in getting started.

Because we had to start somewhere, and because Dr. Mikalson needed a course outline to present to his president and board of trustees for approval, we used the format found successful by STEP, that is to say, a lecture course of two hours per day, one day a week, for ten weeks. The college allowed us to give the course in a vacant classroom in our own building, which met with the approval of the Sausalito Board of Trustees, and which we saw as something of an advantage--since the volunteers came right to the scene of their future endeavors, so to speak. We provided an instructor-coordinator with a junior college credential who was paid by the college from the standard adult education fee of $5.00 per student. Volunteers who might have found it a hardship to pay the fee were given free tuition by the college.

Our class, as you can see, was different in some few minor instances from the usual adult education course. First, the instructor-coordinator--namely me--did more of the latter and less of the former. The whole area of preschool volunteer training being so new and untried, I felt hesitant to set myself up as the final authority on all phases of the subject. Therefore, we invited guest experts to speak at the separate sessions on their separate areas of expertise. Then, as coordinator, I divided my standard instructor's fees among them at so much per hour.

This system seemed to work very well. I have here a specimen sheet of our schedule. (Shows schedule to audience). As you can see, we tried to progress from the general to the specific, hitting several most questioned topics along the way.

The first week we had registration and orientation to preschool procedures. Mrs. Brown, director of our preschool, said to the group: "This is the kind of operation we have here at Manzanita, these are the kinds of children, this is where they come from, this is what we are trying to do. . . this is it."

The second week we had Dr. Staten Webster, who, as you know, comes on like gangbusters, to talk about the socially disadvantaged child. He was followed the third week by Dr. Mary Lane, who comes on just as strong, only sweetly, and she focused our attention on the preschool child. This seemed a good arrangement, and it was Dr. Webster's idea. I had first thought to lead off with Mary Lane, followed by Staten Webster's description of the disadvantaged. But his idea of reversing the order now seems sound, and I believe I would do this again in setting up an orientation course. That is, an introduction to the whole picture and implications of the disadvantaged, followed by focus on the special needs of the preschool child who is a part of this milieu.

The third week's announced topic, "Principles of Learning as They Pertain to the Preschool Child" was almost surely too grand and all-encompassing to be covered in one session. As it turned out, I used the time to talk about loving the child. It is my feeling that this is why we are here--to love the child, and by doing so, to unlock him so that he can be receptive to all the new experiences he is getting in the classroom. . .so that he can learn.

Planned as companion discussions were the twin topics, "Behavior Problems and Emotional Needs of the Preschool Child," followed by "Behavior Problems and Emotional Needs of the Preschool Volunteer". Dr. Grace Cox did a beautiful job of outlining and describing the developmental process of children, and Dr. Thomas elicited thoughtful and sometimes surprising responses to the questions he posed during his two-hour session. We lost a few volunteers that day, which is probably just as well. For if after honest introspection you find that you are involved in a project for reasons other than those you now believe to be valid, then it may be better for you and for others to eliminate yourself sooner rather than later. I do know that as a result of the class confrontation I spent an intensive week of community counseling.

Ira Okun, Superintendent of Marin Juvenile Hall, presented an interesting insight into "The Fatherless Home", and Nicholas Suntzeff, Director of the Marin Family Service Agency, discussed "Children's Art and What It Tells

Us", illustrated with actual examples of children's drawings which expressed their emotional conflicts.

Our own school nurse, Miss Kay Gillis, and our district speech therapist, Mrs. Wanda Jones, collaborated to present a class session on "Speech Patterns and Health Problems of the Preschool Child", and then we finished off and rounded out our orientation course by asking Dr. Mary Lane to conduct a question and answer summary.

Now, in order to be helpful to you, what would I suggest that you do? If I were starting the whole orientation course over again, would I do it the same way? Probably not, because we all try to improve on what we have done before, on the basis of what we have learned.

In the first place, if you are conducting a short-term summer session, you can't possibly stretch out the orientation for volunteers over a ten-week period. So right away the time element becomes very important. Even in a school-year situation such as ours in the Sausalito District, time is important. So I would suggest that for a summer session you call in volunteers for training a week before the program opens--for, say, a forty-minute lecture, twenty-minute discussion, then another hour helping teachers and aides set up the classrooms. This would be daily, Monday through Friday. Then after summer HEAD START opened, you could include volunteers each day in the staff meeting, or if you prefer, hold a separate in-service session for volunteers.

What I am trying to say is that I think it may be advisable to concentrate and intensify the information-giving part of orientation, and if possible, allow time after the first few sessions for question and answer periods based on problems that come up after individual volunteers have worked in the program.

For a year-long preschool, such as ours in Marin City, I would sign up the first 20 volunteers who called, and start them immediately in an orientation program of two hours a day, twice a week. After the first week, I would allow them to work one day a week in the classrooms, and I would use the second hour of each volunteer training class period for question and answer. On the third week of the first class for volunteers, I would start a second class for those who heard about the first one and called in too late to begin with the first group. In this way there would be more or less continuous orientation training going on, and those who missed one or more sessions could "make up" the class by attending the same one in a later group. Always the classes would begin with a general "lecture" type of orientation to the procedures at the particular preschool, discussion of the problems of the disadvantaged, and insights into the world of the preschool-age child. Then could come lectures, movies, and discussions about emotional, social, behavioral, and other problems of children.

I think I would make this course twice a week for six weeks, and at the end of the time, award a certificate to those who had attended at least 75% of the sessions, just as College of Marin did for our volunteers. This is nice for the volunteers to have, and reassuring to administrators of other programs where your volunteers may wish to offer their services at some later time.

If you really want to be ambitious--and helpful--you could organize an intermediate course following the first beginning course, and this could go into the area of learning and ways in which volunteers can help elementary school students with reading problems. For this you might want to use the format already worked out by STEP directors in Berkeley.

Now, so much for past and future, and back to the present. The fourth question in journalism is WHERE? Where are you going to put these volunteers after they are oriented? You will want to put them where they will be most effective and at ease, not only with children, but with teachers. This is where you will need all your skill and knowledge of human relationships. And this is where your school counselor will need to be involved and concerned, and where regular staff meetings will be not only important, but well-nigh imperative. You will want the kinds of meetings where teachers and aides say honestly how they feel about their own classroom situation. You need feedback about how individual volunteers are working out--what their strengths are, and their weaknesses, and whether or not they should be left in one situation, or perhaps for their own ease and effectiveness should be asked to help out in a different situation.

For example, assistant hostesses are needed at snack or meal time, to sit with the children and see that they eat, and to see that they have a happy time, a pleasant experience, while they are eating, and to be sure that there is a learning as well as social process going on while they eat together. One of our volunteers thought this sounded delightful, and that she would love to sit with the children and share this experience with them. But she found she couldn't stand the sight of the messy faces and fingers, and the babble of voices, so she was much happier when given the assignment of helping the counselor bring children to and from the room where individual testing was going on. This gave her individual contact with the children, without the untidiness that offended her sensibilities.

You can soon learn about these things. One volunteer will want to do nothing but teach little dances. Another likes to read aloud, so perhaps she can go from room to room helping at story time. Or perhaps she would be most effective just being a special friend to one child in one room for one period of time one day a week--a special friend who was always there at the appointed time to take him to one corner and read a special story just to him. Some volunteers are marvelous at inoculation time, soothing and comforting the apprehensive who don't want to be "shot". One, whose hobby is gardening, may bring different blossoms each week for the children to see, touch and smell.

It may help you, in making the first assignments of WHERE volunteers serve, to use an information sheet. You may want to learn other things about the volunteers. The volunteers fill these out--preferably at the first orientation session, or at the time they come in to volunteer--and from this you can make a card file of places and people. I wish you could see our file. It is beautiful. We separated volunteers by geographical areas, then by days and hours they could work, then by job preference, as it were. That is, whether they preferred preschool age or other, whether they preferred to help on the playground or in classrooms or cafeteria or nurse's office or office--you can see how it would go. Now, you may think all of these volunteers would certainly want to work with preschool age children, and your volunteers may. One of ours preferred to work only with fourth grade boys. College of Marin advertised the course in their brochures as simply School Volunteer Training, so we got some people who wanted knowledge of how best to be effective in an elementary or junior high situation. I think some of these people were initially a little frustrated, but shortly before school was out we had begun to work out a barter system with other schools in our area who were eager to make use of trained volunteers in their own playground and library and tutoring situations.

We were lucky in our card file system in having College of Marin do some of the work for us. They supply each instructor with IBM cards showing the name, address, and phone number of each student, plus the number of years of high school and college experience each has had previous to this course, as well as the date of birth. So we had a start already. A HEAD START, you might say. We Xeroxed copies of these cards, so that we could keep one and send one to the teacher in whose room the volunteer was to work. On the back of each card we wrote a brief description of the training and experience of each volunteer, her hobbies, whether married or not, and the numbers and ages of her children. This gave each teacher some useful information to help her decide how best each volunteer could supplement or complement her own training and experience. For my own use, I color coded each volunteer's card as to days of the week she was available, whether morning or afternoon session, and the areas where she felt she could best or would most like to help.

My feeling is that there should be a central source of this information. I think each school district, or perhaps each county superintendent's office, should maintain a current file of volunteers such as this one, so that there would be a central "booking" system for volunteers, and people wouldn't be bothered by getting two or three calls for their services from the separate schools. It could all be channeled through a central office, and assignments and re-assignments made from there. This may sound like utopia, but it is certainly something to work toward.

Meanwhile, I do think you will find it efficient and helpful to have some sort of file to which you can refer in making and keeping assignments. It is just like a library. You have to be able to put your hand on the book you want at the time you want it, or else you may as well not have the book at all. A book "lost" from the shelves is even worse than no book, because it is so frustrating to know that you had it once, but just can't seem to find it. It is the same with volunteers. They are frustrated and you are frustrated if, after volunteering and attending class, they aren't allowed to use their knowledge in some helpful way, simply because you don't know where to get in touch with them, or can't remember what it was they offered to do, or when they are available to do it. So the WHERE of volunteers can include not only where to use their services, but where to keep the information you have about them.

What's next? HOW. How are these volunteers going to function within the preschool program as you have it worked out? Well, I hope they would function lovingly, above all else. You may not know all the so-called techniques of teaching preschool children, and you may make what you think are mistakes in meeting their needs, and in helping them learn, but so long as you care about them, and they know you care, then you will have been helpful, not hurtful.

I once worked as secretary to an instructor in pediatrics nursing education at Teachers College in New York, and after days of typing reams of information about child rearing practices, I couldn't stand it. The pediatrics specialist came in one day, found me in tears, so asked what was troubling me. "I'm doing everything wrong!" I wailed. "I have this four year old child, and I'm not doing the right things for him. I'm raising David all wrong." She looked at me seriously. "Do you love David?" she asked quietly. "Oh, YES!" I sobbed. "Does he know you love him?" she continued. "Yes, I'm sure he does", I said. "Then my dear," she concluded comfortingly, "you can't possibly do anything 'wrong'. Whatever mistakes you feel you may have made, or may make, are really not important. What is important is that you love him and that he knows you do. You can't possibly do anything really 'wrong' if you love your child and let him know it." I would hope that volunteers will function lovingly, caringly, in a warm, open, sharing sort of way. I would hope that at the end of the orientation session the whole thing will have been boiled down to the simple suggestion that Dr. Howard Lane presents: "Love that child."

This seems almost too easy in the saying, but is almost too difficult in the doing. Somewhere along the way most of us grownups have mislaid, or have allowed to become overlaid with false veneer, the simple, honest, trustful directness of children. We have worn for too long the mask of the person we think others expect or want us to be. And so we have fears and apprehensions about being exposed, as it were, by the complete candor of a child.

The second question which Dr. Thomas asked of the group on the day he dealt in direct encounter evoked responses of fearfulness and apprehension on this score. The question was: "What are some of your main concerns about being in the program that you would find difficulty explaining or talking about openly to others? What are your gripes, your fears, your concerns?"

Some said, "No problems." And some said, "I don't have any fears." And some were really honest: "I fear my own ability to express constructive criticism at appropriate and effective opportunities." We had to wonder about this one. Did she feel her purpose was as self-appointed censor or critic?

One of them said, "I don't have any fears. I have found very good humans in this class of how to live with each other with love and understanding of each other and ourselves." Another said, "I fear my own feelings of inadequacy about being of real service to the little ones. I'm shy around children, and I run out of ideas at times."

And, "No gripes, no fears of any great dimensions, having just embarked. However, I wish for and hope I will be able to pass the test in the dynamic encounter between child and adult." Here it is again, you see. Can I pass, can I really do it, can I be a real person to these children? Because it has now become obvious that with children you don't fake it. They know you. They can cut right through that facade that we all have spent years building up.

Another volunteer commented, "I'm concerned about my ability to perceive what the immediate needs of the particular child are." Which should give those of us who are on the staff and who are also apprehensive a real clue--we are all in this together, and we are fearful, and the volunteers are the most apprehensive of all, perhaps because of, rather than in spite of, their eagerness to serve. So treat them gently. Some may cause concern, like the lady who wants to know how and to whom she can express constructive criticism. You will have some volunteers like this, and you may as well face it first as last. They have come to you and to the program from their varied backgrounds and from their various needs to help you however you and they feel they best can do so.

And WHY? Why have they come? Because we have all heard the bell toll. We are all a part of mankind, and every bell that tolls, every building that burns, every child who cries--or worse, every child who has learned not to cry, not to care--is a part of you and me, because we are a part of the whole, and because no man is an island.

Involvement and participation--caring and sharing. That's why we are here. Somehow, if we all care enough to give the very best of ourselves, if we share our love openly and honestly and consistently, then somehow some small part of the scene should shift. For the more we love, the more we can love, and the more love we give, the more we have to give--like a bottomless spring, surging; like a ripple in a pool, spreading--until some day our caring and our sharing must surely encompass all of mankind.

And that is why they and we are here.

DEVELOPING POSITIVE SELF-CONCEPTS IN CHILDREN

Dr. Mary B. Lane
Professor of Education, San Francisco State College
Co-Director, Nurseries in Cross-Cultural Education

I have been watching you all week and I have seen you change from a group of somewhat bewildered, confused, and in some measure on the part of some of you, hostile individuals, to a group who seems to be thoroughly enjoying what you are doing with a considerable amount of enthusiasm and good will and zest in the tasks you are undertaking this week in your training. And so I feel that perhaps what I have to say this afternoon will be more like frosting on the cake than the cake itself. I think that probably the cake has already been baked and is probably well done and ready now to be consumed during the next eight weeks that you are working with HEAD START children.

I'm going to try to do three things this afternoon, and I'm not sure how well organized they will be. I hope that when you think about this afterwards, if you do, that you'll be able to feel that I have at least touched on these three points. I'm going to try to sketch briefly how a small child's self-concept is developed. Unless we know that we are going to be in trouble all summer long. In order to do that I have to say a little about what self-concept is as I understand it. And then I want to talk very extensively about how you as a teacher, or an aide, or as a parent in HEAD START can help *in this process of development of positive self-concept; and third, how your* own knowledge of yourself and your self-concept comes into play as you work with children.

Now what is this thing that we call "Self-Concept"? We have many different words that we use in our educational vocabulary, some people may call this ego development. Some people might call it self-esteem or self-regard. Whatever it's labeled, whatever we're talking about this afternoon is this picture and the feeling that each of us carries around with us as being me, mine. Self-concept has several parts to it. How you feel yourself in space is a very important part of the self-concept. And it is particularly important for children. One of my NICE teachers this morning brought an advertisement in from the Follet Publishing Company that showed one little child crawling under a table, another one standing up on top of a chair, and another one jumping over something, and it said, "These are ways to teach your child to read." And I thought that's really great when you find a publishing company that publishes readers with enough understanding to know that the way a child feels himself in space, feels his body in space, and the control that he has over the space that is his environment is really a very essential point in the development of the child.

You will be having children this summer who do not feel secure in space. They will be the children who hang back; who will even perhaps be a little bit reluctant to get on the tricycle. So one of the most important things, I think, that you can do as you work with these children is to try to assess--

how does this particular youngster feel himself in space? How does he feel his body; does he really feel that he has control; that he can master the space that is around him; has a comfortable feeling when he is turned upside down as well as when he is standing on his two feet? Or when he is hanging from a bar or whatever it happens to be. When we get older, of course, we have a lot of other dimensions of this business of feeling yourself in space. Then you wonder if that arthritic arm is going to make it up there when you reach for a high shelf. Some of these things enter into our self-concepts as adults. There is a degree of comfort in recognizing that all of us, no matter who we are, have certain kinds of shortcomings, certain things that we would like to have a little bit different about ourselves. If only we can recognize this and say, "Aha, I don't like the fact that I'm so doggone short, but that's the way I am and there is nothing that I can do about it, you know."

Another part of the self-concept is: How do I see myself in time and in relation with other people? How do I feel about the images that I have of myself as a person? Do I, as I think of myself, feel a little bit ashamed of the way that I have grown and developed? Do I feel that maybe I've got to hide a great deal of who I am from the world because if the world found out they wouldn't like me quite so well? This is a part of the self-concept. So we might sum it all up by saying that all of the me and the mine, all of my feelings about myself and all my relations with people and the feelings I have about people and about the way in which I live. The very important thing, I think, for us to keep in mind as teachers, is every single one of us lives in a different world. Your world is not my world, and you can never enter my world. You can get some gleamings, some glimmerings about what my world is like through knowing me, but you can never fully enter my world. And I think that we overlook this in our educational processes. We talk about the unique individual. Well, the individual's world is also unique to him because each of us brings to our world ourselves and this makes it unique.

Now I would like to go back, and I'm going to try to do this very quickly, because our time is so short, and trace just a little bit about how a child develops the way he feels about himself. I want to use a few illustrations and a bit of research to back up what I have to say about this. I want to start with the baby because all of these children that you've had have been babies. They have all lived four or four-and-a-half years and a great deal has gone on, too, in that time. It helps if we can kind of think about this, and if you think about this Monday morning or whenever it is that you meet your children for the first time, "Well, I wonder what kind of a baby he was. Was he a cuddly type, or a sprawley type? Was he a type that was an active type or was he a passive little baby?" Some of these things will give you some clues as to how you can relate to this child as you work with him this summer.

Most of you in this room know that we believe that a baby doesn't distinguish itself from its surroundings. It really doesn't know where it ends, for instance, and the blanket begins. And the more that we know about physiology and neurology the more that we feel that this is an accurate concept. Because we're learning now that the nerve endings for touch and temperature and taste are the first to really get into a functioning kind of state so that they can be used. So touch and taste are important senses in the first stages. The baby feels himself to be a sense of being, a coldness, a wetness, a hunger or whatever it is. Lillian Smith has said: "In the beginning was the word. It's a beautiful first line for a biography of a human being, but it's not quite true. Before words came a feeling between mother and child. This can be described as a feeling of warmth and comfort; a feeling of being a part of; of being bound together and at the same time being free. It's the feeling that expresses the need to serve and to be served, to give and to take, to support and to lean." And from these feelings says Lillian Smith must have come the miracle of words. Now you are going to be very concerned this summer, most of you, with what you have called and what the speakers that you had this week have been calling "language development". It may be helpful for us to stop and reconsider these feelings which must come before language can have very much meaning.

I'd like to repeat them to you, and see if you can think of situations as I talk from your own experiences with children in which these kinds of feelings have operated. A feeling of warmth and comfort; a feeling of being a part of. Now what does that take? It doesn't take being "done to", does it? A great deal of our traditional teaching, I think, is doing to or doing for but the kind of feeling we want to generate among these children, if they are going to have a positive self-concept, is a feeling of being a part of; you know, being involved. I'm a part of this class and I count, because I am here. A feeling of being bound together and at the same time being free. And that is a very tricky kind of feeling to get, isn't it? To get it just right, you know? So that you feel that you are cohesive; you have ties with each other; you can feel these ties binding you together. And yet, at the same time, these ties are not restricting you from being yourself. You can be free.

If we can get this kind of feeling in our classes I'm sure that we will have language development. Because people will talk, children will talk if they feel like talking. But they won't talk if they don't feel like talking. This has a special relevancy, I think, for children who speak a language which may be different from your language. When they come in they need to hear something that is comforting to their ears. And if that something is Spanish they need to hear Spanish. And if that something is a dialect of southern Mississippi talk they need to hear that, if possible. So that they can feel a sense of being a part of and a sense of being free to communicate to someone who really understands them. It's a feeling that expresses a need to serve and to be served, to give and to take. Many of you will recall that two year olds have a very fetching kind of way of wanting to bring you something and give it to you, even if it is an imaginary something they'll pick it up and give it to you. I think this is the feeling of wanting to serve. They're served all the time and they want to do something for you too, you know, give you something; a present. So maybe we can stimulate this among our children. To give and to take, to support and to lean.

Now the baby, as he grows, gets these feelings as Lillian Smith has said from the mother. But suppose he hasn't had a mother to give him these feelings and he may come to you at age four never having known an adult who really stimulates this kind of feeling in him. This is your opportunity, then, to somehow over the eight weeks of time, and it won't come the first day, to help him to begin to see you as an adult whom he can trust. And who will help him trust himself. If you can be this, then you will have contributed to the first great developmental stage in every human being's life--the ability to have some trust in his world and in the people who are around him.

Many of your children already have this and if they do then you need to work on something else. But you will find many children who don't. You will find, for instance, a mother who is working and who must leave her baby around, and around probably means someplace different every day, or a mother who works hard all day doing somebody else's housework and comes home too tired to cuddle and soothe her children and give love; a mother who has learned to gratify her own pleasures first because that is all that she can see in life for her, or a mother who has learned from her mother to give her kids a cuff and shout, "Shut up!" when they cry--these mothers are not likely to raise trusting children. And this is where the teacher has to come in. The one to one relationship which comes from having a sense of trust in an adult who means a great deal to you can really work miracles. I'd like to cite two illustrations of this. Children who were reared in an orphanage were kept clean and well fed but rarely handled, emotionally and mentally were found to be less healthy than babies reared in a prison nursery by their own mothers. And yet, we as a society, tend to be very condemming of these mothers, don't we? Now you keep that in mind, please, when you begin to get nagging thoughts, when some of your bosses tell you that mothers shouldn't be allowed to be in the classroom because the kids might pick up bad habits from them.

The next example that I would like to cite is one that comes from the studies that took place in the 30's and early 40's in the Iowa Child Welfare Research Center which had two groups of children who were tested mentally retarded as young children. Iowa is a very stable state and it is twenty-five years later now and they've made a follow-up study, and they have had ninety-five to a hundred per cent returns in their follow-up study so this makes the results rather valid. The sample was divided into two groups: the control group and the experimental group. Thirteen children were in the experimental group, all mentally retarded at the start of the study. They transferred these children from one institution to another one with a higher ratio of mother-surrogate child interaction. And later, just as soon as they could get around to it, eleven of these children were placed in adoptive homes. The control group was kept in an institution which had a minimum amount of interaction with adults. In the follow-up study, twenty-one years later, all twenty-five of these children have been located and their histories studied. Listen to what happened to them. All thirteen children in the experimental group are self-supporting. None of the thirteen is a ward of an institution. Eleven of the thirteen are married, and nine of these have children. Now of the twelve children in the control group, one died in adolescence, having been in a state institution all of his life, and four are still wards of institutions. Five out of twelve, almost fifty per cent, that lived all of their lives long in an institution. Among those no longer wards of institutions only two have married, and one is divorced.

In education the comparison between the two groups is great. In the experimental group the median grade completed is the twelfth. Remember these were tested as mentally retarded children and the median grade is the twelfth. In the control group the median grade completed is the third. Four in the experimental group have had four or more years of college. One of the boys had received a B.A. degree. Occupationally the group ranges from professional to semi-professional to semi-skilled labor or domestics. In the control group fifty per cent of the subjects are unemployed and those who are employed are with the exception of one, unskilled laborers. One girl in the experimental group who initially had an I.Q. of 55 has subsequently graduated from high school and taken one semester at college. She is married, has two boys, and the children have been tested and have achieved I.Q. scores of 128 and 107. If this girl had the continuing experience characteristic of those in the control group she would have remained all these days on a custodial ward in an institution for the mentally retarded or would have been sterilized at late adolescence or early adulthood and subsequently have been placed in non-skilled labor or domestic employment. In fact the reviewers say, "But for the grace of God anyone of the cases in the experimental group might have experienced the impact of deprivation of those in the control group and vice versa." Now, I cite this because I think that this is a stunning illustration of the importance of relationships. The thirteen children in the experimental group had warm, loving relationships. They learned to find an adult whom they could trust and who could help them to trust themselves.

We need to be aware, as teachers, of the significance of how we ourselves and how parents feel about their children, and how these feelings are communicated to their children. And to realize that for those children who have not known trusting adults, you have a magnificent opportunity to communicate to these children that you do trust them. And this may be kind of hard to do when you find them in some rather risky situations. But if you are always standing around saying, "Be careful, that's sharp; that's too high; you're going to hurt yourself"--that's not a very good way to communicate trust, is it? You have to almost be able to say to yourself that you have to be willing to take a little bit of a risk in order that a much greater gain may come. The gain of feeling I can do this--I accepted my impulse and I can do it.

The second developmental phase of the child's life--autonomy--comes as he gets up on his two feet and starts to walk. And along with autonomy comes the possibility of shame and doubt. This is the time when the child develops a great sense of I can, and I will. I will do this myself is a very familiar phrase when you try to help a two year old or a three year old. Now one of the things I think that you need to be aware about and think about, as you think about your work, is that perhaps many of your children will have much greater autonomy than you've been accustomed to. Many of these children are able to dress themselves, able to get their own breakfasts, able to find their clothes in a cluttered heap someplace, and maybe even pick out two socks that match, and are able to care, sometimes, for their younger brothers and sisters. Now one of the things I think that we want to try to do is to preserve this. And not make autonomous children dependent children. It is so easy to make a child dependent upon us. Because, we as adults need dependency, don't we? We need to feel that somebody needs us and relies on us. Sometimes these things seem almost contradictory and the role of the teacher or the aide is to find that line, you know, the perilous line to follow with each child. You've probably all heard the story of the little Taft grandchild who said, "My great-grandfather was President of the United States. My grandfather was Senator from Ohio, and my father was Ambassador to Ireland, and I am a Brownie." Now she had a sense of knowing who she was and she was doggone proud of it, you know? And this is the kind of feeling that we ought to try to develop with these children. This is the time when the child needs to learn self-control without loss of self-esteem.

A little bit later, and hard to distinguish from autonomy, is the stage called "initiative". This is the time that the child learns to develop a sense of the other person. And so he has the opportunity now to feel guilt. This is the time when intrusive activity characterizes the child's life. He's learned to walk, he probably has very good command of his muscles, and he may have learned some language. He knows he is a person, he has some sense of identity, and now he is busy trying to find out how he can use that. What kind of person is he? How can he relate to other people and get them to do what he wants to do? He is ready for an expression of his imagination and for more complicated forms of discovery. This is also a time when sex identification usually matures. Now let's remember that even though your children are four years old or four-and-a-half, they may be in the developmental stages, still, of the baby. If they haven't learned to develop trust, they can't have very great autonomy. If they haven't learned to develop autonomy, they can't have very much initiative.

As a teacher one of your tasks is to first of all be a diagnostician. You have to assess, you've got to be able to look at these children, to size them up, to try to walk enough in their shoes, to feel as they feel, and to then say, "Yes, I think I know what it is that this particular child needs." And then try it out and if it doesn't work, try out something else. Many people who have worked with so-called culturally disadvantaged children say that in many ways they seem more like two and three year olds than they seem like four and almost five year olds. And so you may very likely find a great need to stimulate autonomy and initiative, even if trust is intact. Many of these children who will come to us will be severely damaged. Some will be sturdy citizens who have a firm grip on who they are. Some will have learned, even at this early age, that they are different. People stare at them and giggle at their speech. Their mothers use the back door. I'd like to give you a short poem that indicates how very powerful an image is that one forms during childhood and how much it affects the self-concept.

This is Countee Cullen's little poem called Incident--it's a true life incident:

> Once riding in old Baltimore,
> Heart-filled, head-filled with glee,
> I saw a Baltimorean,
> Keep looking straight at me.

Now I was eight and very small,
And he was no whit bigger,
And so I smiled, but he poked out
His tongue, and called me, "Nigger".

I saw the whole of Baltimore
From May until December;
Of all the things that happened there
That's all that I remember.

Maybe one of the very great things which you could do this summer would be to try to think of what your children will remember. Because the memories are really the content of the self-concept. These children have many different ways of expressing their feelings. Some of them fight back. We call them the acting-out children. They are probably the healthiest ones. They are certainly the most annoying ones; and they are the ones that we are most likely to start stepping on. I think that what we ought to try to do is to get all the kids to be acting-out kids. Because this is one step in the process of developing a healthy self-concept. You have to be able to try out, to act out, even if it's a negative thing that you're acting out. Maybe the child is calling the teacher a dirty old S.O.B. You are going to have to hear some language like that this summer. And hear it without blinking an eyelash and without accepting it as a personal insult to you. Maybe you've heard Jessie Stanton's story of the little boy who wouldn't speak in school. She is retired and the young teachers in New York City used to call on her to come and help them out when they had a particularly tough problem. So they asked her if she would come out and talk with this little boy. She sat down beside him and she tried to get him to talk and she pressed a little too hard. She wasn't as skillful as she ought to have been that morning, and finally the boy said, "You, you son-of-a-bitch!" She asked, "What does that mean?" and he said, "Well, I don't know, I guess it means the car won't start." Now you see, she didn't accept it as a personal insult, and that's the reason that this language usually annoys us. It's shaking our dignity.

Now I'd like to spend the remaining fifteen minutes I have on just kind of rambling on about what are some of the ways that you as a teacher can help in the process of developing a positive self-concept. Next to the mother probably the teacher has more opportunity to influence children in the way that they feel about themselves than any other person in our society. And any teacher who doesn't know what the feelings are that he generates in his classroom, that teacher doesn't know what he teaches. Let me say that a different way. No teacher knows what he teaches unless he knows the feelings generated in each individual child in his class. Because it is the feelings that are going to be remembered. As Arthur Combs says: "You are your most powerful teaching instrument. You have yourself to work with, and if you are going to have yourself to work with in teaching, you have to think about 'how do I feel about this'".

You've heard a lot of admonitions this week from many very wonderful people. And they have all been here trying to help you, just as I am now. But when you step into that classroom you've got to do and be yourself. Everybody else, nothwithstanding! If you are not yourself, and we hope that you will be your very best self, but if you are not yourself, if you are not doing those things that you are comfortable doing, and in which you have some assurance, then you are going to communicate a good deal of ambiguity and discomfort with the children with whom you work.

I'd like to say this too, that it is very difficult for us school teachers sometimes to remember for whom we work. We don't work for the man uptown. We don't work for the gal that sits in the central office. We work for the kids. And if we're not working for the kids, we shouldn't be in the business. And when what we feel is good conflicts with the instructions which we get, if it is a really important issue that we have very strong feelings about, we have the responsibility to take that up with the people who have given the instructions. Rather than to say, "Well, what can I do about it, I'm just a poor little old teacher?"--well, you poor little old teachers can do whatever you want to do about it. You are the instruments through which the children are going to experience whatever it is they experience this summer. And we have to be able to stand up on our two feet, and say "This is what I believe. These are my reasons for believing it, and I want to have some opportunity for resolving the issue." In the place where it should be resolved. Not misplacing or displacing that feeling on the kids. You know if you do something that you have been asked to do, that you don't agree with, very likely you are going to be very angry inside, and that anger is going to get displaced on the youngsters if it doesn't get a chance to get expressed at its source. It'll get displaced and expressed with the children. So I hope you keep thinking about this this summer. Because it is inevitable that when you are working with a large organization, there are going to be some cross-currents. Here are some other ideas. I think that as you leave this seminar you need to ask yourself, "Have I become any more aware of what irritates me, what pleases me, what kinds of people I feel like barking back at, and what kinds of people I feel like sitting down and having a cup of coffee with?" You might ask yourselves some questions. "Why do I feel so alone at times? What are some of the areas that I'm particularly irrational about? What sources of authority really get my goat? Can I take orders from a woman, if I'm a man? Can I take orders from a younger person if I'm an older person? What threatens me? What am I fearful about?" If you really honestly think about these questions and begin to become more aware of your own feelings, you'll come through more congruently with the children. We've spent most of our lives, I believe most of us have, in hiding our feelings, and we sit and smile at a person when we're just burning up inside many times, don't we? Don't you? I do. And when we do this year after year after year we begin to forget who we are and so it's important to take stock, once in awhile, and I think this is a very good time to do it because you have had a very stimulating experience and many of you are going into something that is new and challenging and different. You really need I would say from now until the time you start, some sense of sort of sitting down with yourself and saying, "What was the real me of that week's experience when I push away all of the words that were said? What did I really get out of it? Was it that wonderful feeling I had when I danced with Gertrude Knight? Was it that wonderful feeling I had when I played that musical instrument? Was it that wonderful feeling I had when I sat in the seminar and I felt myself communicating with this person and that person?" If you can do this then I think you can begin to get more, and more, aware and more alert to the feelings of other people.

Now what are some other things that you as teachers can do to develop a positive self-concept in children? These are a sort of hodge-podge of ideas. If I were teaching in HEAD START, I would get myself a camera, and I would take pictures by the carloads full. It's wonderful to take pictures once a year, once a summer and put them up and all of that sort of thing. But I would have pictures up all the time, all sorts of pictures, every day there would be some different pictures going up. And I would try to get a little money in my budget for the enlargement of some of these pictures. If I couldn't get money in the budget, I would try to get somebody who would give a little of his time to enlarge some pictures. This is a marvelous way for a child to see himself. You know yourself that you often see things come home to you in a picture which you haven't really seen before. I looked at a photograph of an old friend of mine just yesterday. And I thought, "My, how old he looks." I saw him in March and I didn't feel this when I saw him, but the photograph showed it to me. The same thing happens with children. They see themselves. If they can see themselves in some positive, exciting, interesting situations, they begin to look at their lives, and think of themselves, in this way.

I would certainly at the beginning of the HEAD START program place major emphasis upon motor activities. And I would try to get all of the children to dare to do some things that they haven't dared to do before. I'm going over these very quickly because our time is very short. I would most of all try to see each one of these children as a person. As very different but very sweet. As my grandmother used to say, "Each child is different and each one is sweet." It's so easy to fall into the habit of saying, "Now boys and girls, let's come over here." "Now children, we will have a story." Instead of saying, "Johnny, would you like to go get Sally and bring her over here for such and such a thing?" Last summer I saw a HEAD START program where they had made beautiful name tags and pinned them on each child. They made them out of felt so they would last all summer long. I sat there all morning, listening, and I didn't hear a single name spoken. I was like Queen Victoria said about Disraeli, "He always speaks to me as if I were an institution." I think that we school teachers have a way of speaking to children as if they are institutions. We think of them all as a conglomerate whole and we don't individualize them because when we talk this way, we begin to see them this way too. Certainly they get the feeling that we see them this way.

I think I said something the first day I was here about our mania to instruct. We as school teachers have a great mania for instruction. And I would like to see us this summer lay aside our instruction skills and start living, just living, just being with the children. This means a lot of things. It means that when a child comes in in the morning we are not so concerned with getting the equipment out that we don't have time to take him by the hand and walk with him to a table and sit down with him and start putting a puzzle together, or working with the clay or whatever it is he wants to do. It means when lunch-time rolls around that we don't go off and eat our lunch by ourselves, and turn the lunch over to the aides because after all they can do that simple little thing. It means we sit down and we eat with the children. I am convinced that food to young children is very closely related to love. After all, the major thing that a mother does for the first two or three years is to feed him, isn't it? And somehow there is that identification that we never lose. I guess maybe if your husband says, "Come on, I'm going to take you out for a great steak dinner tonight", you say, "Ah, he loves me!" To little children cooking is a very important activity. I hope we'll use all of our eating occasions as occasions when we try to simulate a family. We're sitting down to have a good time together--to enjoy talking with each other. We're not talking in an artificial way so that we've got to hold up the carrot and say, "Now, isn't this a pretty yellow carrot?" But just let the conversation sort of flow out easy and with some humor, with some sense of the ridiculous as well as the pleasant kind of thing.

One of the things that we have to be careful about is that we don't equate positive self-concept with adequacy. I can think well of myself even if I can't skip, or tie my shoelaces, or know my colors, or perform well on a reading readiness test, or on a list of words that somebody has decided I should know by the end of the summer. I can if my teacher will help me--help me by valuing what I value; by telling my parents what a fine lad they have; by listening to me and looking right into my eyes when I talk to her. The plaintive little comment of the boy in the first grade who said, "What I like about my first grade teacher is she knows my name", comes to mind.

Certain attitudinal changes are necessary if we are to free this child to be his best self. First we must believe that the child is his own motivator, and act upon that belief. He is his own motivator. We don't have to spend time motivating him. He impells himself. Robert White has developed a theory to encompass the idea that human beings motivate themselves that he calls "competency or efficacy motivation". He has found out by studying the young of many species that their play is not random activity but it is activity in which they are drilling themselves in the competencies or skills which they need in order to live. Play has survival value. This goes all the way up from kittens to human beings. So if you have the right sort of stuff around for the children and help them in their play, they will learn the kinds of things that you are interested in having them learn.

Second, if the child is going to be free to be himself the teacher has to make certain basic assumptions about how children learn. He has to believe that learning is a highly personal matter. And that the match between what is familiar and what is novel is discovered by the child himself. We can't do that for him. He has to make his own match, i.e., he has to link or relate the novel, the unfamiliar, with something that is familiar.

Third, we have to assume that we have only begun to tap the potential of human learning. We have to assume that every human being has more interest, more ability than he can ever fully cultivate and that it is up to each individual to choose for himself the particular talents and directions of his life. We the teachers are the stage setters and the scene shifters--not the writers of the script in another's life. Finally, we need to cultivate the idea that there are no hierarchies of worth. A pecking order has no place in the development of free human beings. This means that as we work with children we see each one as worthy as the next one. And that as we work with volunteers and aides and parents we see each one as worthy as the next one. There has to be a quality of unconditional acceptance on our part if we are going to be successful in working with children.

I'd like to close by quoting from Carl Sandberg, who, I think, has said what I would like to say to you in closing more beautifully than I can say it:

> Who was that early sodbuster in Kansas? He leaned at the gatepost and studied the horizon and figured what corn might do next year and tried to calculate why God ever made the grasshopper and why two days of hot winds smother the life out of a stand of wheat and why there was such a spread between what he got for grain and the price quoted in Chicago and New York.
>
> Drove up a newcomer in a covered wagon: "What kind of folks live around here?"
>
> "Well, stranger, what kind of folks was there in the country you come from?"
>
> "Well, they was mostly a lowdown, lying, thieving, gossiping, backbiting lot of people."
>
> "Well, I guess, stranger, that's about the kind of folks you'll find around here."
>
> And the dusty gray stranger had just about blended into the dusty gray cottonwoods in a clump on the horizon when another newcomer drove up: "What kind of folks live around here?"
>
> "Well, stranger, what kind of folks was there in the country you come from?"
>
> "Well, they was mostly a decent, hardworking, law-abiding, friendly lot of people."
>
> "Well, I guess, stranger, that's about the kind of folks you'll find around here."

If we can be mostly a lawabiding, friendly, hardworking lot of people, I'm sure we'll have a lot of success with HEAD START.